### Case 17-01124 Doc 1 Filed 01/13/17 Entered 01/13/17 22:34:08 Desc Main Document Page 1 of 64

Fill in this information to identify your case:	
United States Bankruptcy Court for the:  Northern District Of Illinois	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Anthony First name Vernon Middle name	Minara First name Marie Midde name
	Bring your picture identification to your meeting with the trustee.	Bogart Last name	Bogart Last name
	mar vio a doctor.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	Minara First name Marie
	Include your married or maiden names.	Middle name	Middle name Spangler
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name .
P909005556			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer	xxx - xx - <u>5</u> <u>0</u> <u>3</u> <u>2</u> OR	xxx - xx - <u>4</u> <u>8</u> <u>4</u> <u>3</u> or
	Identification number (ITIN)	9 xx - xx	9 xx - xx

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Det	otor 1 Anthony Vernon Bo	gart	Case number (if known)
	First Name Middle Na	ime Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or ElNs.	☑ I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		919 E. Jackson St. Number Street	Number Street
		Number Street	Hambol Greek
		M 11 COAFO	
		Morris         IL         60450           City         State         ZIP Code	City State ZIP Code
		GRUNDY County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)\_

Anthony Vernon Bogart

Debtor 1

	FIRST NOME MIDDLE NAT		Last Mame				
Pa	art 2: Tell the Court Abou	ut Your B	ankruptcy (	Case			
7.	The chapter of the Bankruptcy Code you	Check or for Bankı	ne. (For a brief ruptcy (Form E	f description of each, s 32010)). Also, go to the	see <i>Notic</i> e top of p	ce Required by 11 page 1 and check	U.S.C. § 342(b) for Individuals Filing the appropriate box.
	are choosing to file under	☐ Chap	oter 7				
		☐ Chap	oter 11				
		🔲 Chap	oter 12				
		☑ Char	oter 13		ogramativiti tibili		
8.	How you will pay the fee	local your: subn	court for mo self, you may	ore details about how y pay with cash, cas payment on your bel	w you m shier's c	nay pay. Typicall heck, or money	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check
							otion, sign and attach the ents (Official Form 103A).
		By la less pay t	iw, a judge n than 150% c the fee in ins	nay, but is not requi of the official poverty	red to, v line that noose th	waive your fee, a at applies to you iis option, you m	ion only if you are filing for Chapter 7 and may do so only if your income is in family size and you are unable to sust fill out the Application to Have the with your petition.
9.	Have you filed for	⊠ No					
	bankruptcy within the last 8 years?	Yes.	District		_ When	MM / DD / YYYY	Case number
			District		When		Case number
					_ ******	MM / DD / YYYY	
			District		_ When	MM / DD / YYYY	Case number
10.	Are any bankruptcy	⊠ No		AND			
	cases pending or being filed by a spouse who is		Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an		District		When	MM/DD/YYYY	Case number, if known
	affiliate?		Debtor				_ Relationship to you
			District		_ When	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	⊠ No. □ Yes.	Go to line 12 Has your lan residence?		ction judç	gment against you	and do you want to stay in your
			No. Go to				
				out <i>Initial Statement A</i> cruptcy petition.	bout an	Eviction Judgmen	t Against You (Form 101A) and file it with

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Debtor 1	Anthony Vernon Bog				Case number (if known	)	
	First Name Middle Nam	à	Last Name				
	•						
Part 3:	Report About Any E	usines	ses You Own as a So	ole Proprietor			
	you a sole proprietor	🛚 No.	Go to Part 4.				
	ny full- or part-time ness?	☐ Yes	. Name and location of b	usiness			
	e proprietorship is a						
busin	ess you operate as an dual, and is not a		Name of business, if any				<del></del>
separ	rate legal entity such as						
a corp LLC.	poration, partnership, or		Number Street				
	have more than one						
sole p	oroprietorship, use a						
	rate sheet and attach it spetition.		0.1		Ctata	ZIP Code	
	•		City		State	ZIP, Code	
			Check the appropriate	hox to describe your bu	usiness:		
			☐ Health Care Busine				
			☐ Single Asset Real B	•			
			☐ Stockbroker (as det	-		"	
			-	_			
			☐ Commodity Broker	(as defined in 11 0.5.0	J. 9 101(b))		
			☐ None of the above				
are y debt For a busin	kruptcy Code and you a small business tor? I definition of small ness debtor, see S.C. § 101(51D).	any of t	these documents do not a lam not filing under Ch	exist, follow the proced napter 11.	lure in 11 U.S.C. §	and federal income tax re 1116(1)(B). tor according to the definit	
		☐ Yes	. I am filing under Chapt Bankruptcy Code.	er 11 and I am a small	business debtor ac	cording to the definition in	the
	-						
Part 4:	Report if You Own	or Have	Any Hazardous Pro	perty or Any Prope	erty That Needs	Immediate Attention	
Part 4:	Report if You Own	or Have	Any Hazardous Pro	perty or Any Prope	erty That Needs	Immediate Attention	******
14. Do y	ou own or have any	or Have	Any Hazardous Pro	perty or Any Prope	erty That Needs	Immediate Attention	## ## ## ## ## ## ## ## ## ## ## ## ##
14. Do y prop	rou own or have any perty that poses or is	⊠ No	Any Hazardous Pro	perty or Any Prope	erty That Needs	Immediate Attention	
14. Do y prop alleg of in	rou own or have any perty that poses or is ged to pose a threat priminent and	⊠ No		perty or Any Prope	erty That Needs	Immediate Attention	
14. Do y prop alleg of in iden	rou own or have any perty that poses or is ged to pose a threat nminent and tifiable hazard to	⊠ No		perty or Any Prope	erty That Needs	Immediate Attention	
14. Do y prop alleg of in iden publ	rou own or have any perty that poses or is ged to pose a threat priminent and	⊠ No		perty or Any Prope	erty That Needs	Immediate Attention	
14. Do y prop alleg of im iden publ Or d prop	rou own or have any perty that poses or is ged to pose a threat minent and tifiable hazard to lic health or safety? o you own any perty that needs	⊠ No	s. What is the hazard?				
14. Do y prop alleg of in iden publ Or d prop imm	rou own or have any perty that poses or is ged to pose a threat minent and tifiable hazard to ic health or safety? o you own any perty that needs ediate attention?	⊠ No	s. What is the hazard?			Immediate Attention	
14. Do y prop alleg of im iden publ Or d prop imm	rou own or have any perty that poses or is ged to pose a threat minent and tifiable hazard to lic health or safety? o you own any perty that needs	⊠ No	s. What is the hazard?				
14. Do y prop alleg of im iden publ Or d prop imm	rou own or have any perty that poses or is ged to pose a threat minent and tifiable hazard to lic health or safety? o you own any perty that needs ediate attention? example, do you own hable goods, or livestock must be fed, or a building	⊠ No	s. What is the hazard?	n is needed, why is it no	eeded?		
14. Do y prop alleg of im iden publ Or d prop imm	rou own or have any perty that poses or is ged to pose a threat minent and tifiable hazard to lic health or safety? o you own any perty that needs ediate attention? example, do you own hable goods, or livestock must be fed, or a building	⊠ No	s. What is the hazard?  If immediate attention	n is needed, why is it ne	eeded?		
14. Do y prop alleg of im iden publ Or d prop imm	rou own or have any perty that poses or is ged to pose a threat minent and tifiable hazard to lic health or safety? o you own any perty that needs ediate attention? example, do you own hable goods, or livestock must be fed, or a building	⊠ No	s. What is the hazard?  If immediate attention	n is needed, why is it no	eeded?		
prop alleg of im iden publ Or d prop imm For e perist that n	rou own or have any perty that poses or is ged to pose a threat minent and tifiable hazard to lic health or safety? o you own any perty that needs ediate attention? example, do you own hable goods, or livestock must be fed, or a building	⊠ No	s. What is the hazard?  If immediate attention	n is needed, why is it no	eeded?		

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Debtor 1

Anthony Vernon Bogart

Middle Name Last Name

Case number (if known)

Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	: Deb	tor 1
-------	-------	-------

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ľ	I am not required to receive a briefing aboι	J
	credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

! received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known)

Anthony Vernon Bogart

Middle Na

ast Man

Debtor 1

Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and ☐ No administrative expenses Yes are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do X 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 5,001-10,000 50.001-100.000 owe? ☐ More than 100,000 **100-199** 10,001-25,000 200-999 \$0-\$50,000 ■ \$500,000,001-\$1 billion 19. How much do you \$1,000,001-\$10 million estimate your assets to **S50,001-\$100,000** ■ \$10,000,001-\$50 million ■ \$1,000,000,001-\$10 billion be worth? \$10,000,000,001-\$50 billion \$100,001-\$500,000 \$50,000,001-\$100 million □ \$100,000,001-\$500 million ☐ More than \$50 billion □ \$500,001-\$1 million \$500,000,001-\$1 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million estimate your liabilities \$50,001-\$100,000 ☐ \$10,000,001-\$50 million \$1,000,000,001-\$10 billion to be? ■ \$50,000,001-\$100 million \$10,000,000,001-\$50 billion ■ \$500,001-\$1 million \$100,000,001-\$500 million ☐ More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. s/Anthony Vernon Bogart s/Minara Marie Bogart Signature of Debtor 1 Signature of Debtor 2 Executed on 01/12/2017 Executed on 01/12/2017 MM / DD / YYYY MM / DD / YYYY

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ebtor 1	Anthony Vernon Bog	art	Case number (if known)	
2,0,	First Name Middle Nam	e Last Name		
presen you are	attorney, if you are ted by one not represented orney, you do not ile this page.	to proceed under Chapter 7, 11, 12, of available under each chapter for which the notice required by 11 U.S.C. § 34 knowledge after an inquiry that the inter-	d in this petition, declare that I have infor 13 of title 11, United States Code, and the person is eligible. I also certify the 2(b) and, in a case in which § 707(b)(4) formation in the schedules filed with the	I have explained the relief at I have delivered to the debtor(s) (D) applies, certify that I have no
eu to n	ne una page.	★ s/James M. Durkee	Date	01/12/2017
		Signature of Attorney for Debtor		MM / DD /YYYY
		James M. Durkee		
		Printed name		
		Malmquist and Geiger, LLC		
		Firm name		
		415 Liberty St.		
		Number Street		
		Morris	IL	60450
		City	State	ZIP Code
		Contact phone (815) 942-5072	Email address	jimdurkee@mglawoffices.com
		6296297	<u> </u> L	
		Bar number	State	
				NOTES AND SECULAR ASSOCIATION OF THE PROPERTY

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Fill in this in	nformation to ic	lentify your case and t	this filing:	
Debtor 1	Anthony	Vernon	Bogart	
	First Name	Middle Name	Last Name	
Debtor 2	Minara	Marie	Bogart	
(Spouse, if filing	) First Name	Middle Name	Last Name	<u> </u>
United States	Bankruptcy Court	for the: Northern Dis	trict of Illinois	
Case number				

Official Form 106A/B

### Schedule A/B: Property

12/15

Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. 919 E. JACKSON ST. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land \$87,117.00 \$ 87,117.00 Investment property 60450 MORRIS Describe the nature of your ownership ☐ Timeshare City ZIP Code interest (such as fee simple, tenancy by ☐ Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee Simple Ownership Debtor 1 only GRUNDY Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land ☐ Investment property Describe the nature of your ownership Timeshare interest (such as fee simple, tenancy by ZIP Code City State Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only ☐ Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

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Case number (if known)

Bogart Last Name

Anthony

Debtor 1

Vernon

Middle Name

1.3.			What is the property? Check all that apply.  Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule D:</i>
	Street address, if available	, or other description	Duplex or multi-unit building Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
			Manufactured or mobile home	\$	\$
			Land	Ψ	Ψ
	O.T.	State ZIP Code	☐ Investment property ☐ Timeshare	Describe the nature of	of your ownership
	City	State ZIP Gode	Other	interest (such as fee the entireties, or a life	
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	County		Debtor 2 only	D	
			☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
			Other information you wish to add about this ite	,	
			property identification number:		
			ll of your entries from Part 1, including any entries		\$87,117.00
you t	nave attached for Part	I. Write that number i	here	→	
art 2:	Describe Your \	/ehicles			
o you o	own, lease, or have leg that someone else drive vans, trucks, tractors,	al or equitable interes. If you lease a vehicles sport utility vehicles  DODGE  STRATUS  1999	st in any vehicles, whether they are registered or the, also report it on Schedule G: Executory Contracts of the property? Check one.  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
ou own Cars, N X Y	own, lease, or have leg that someone else drive vans, trucks, tractors, o es  Make:  Model:  Year:  Approximate mileage:  Other information:	al or equitable interes. If you lease a vehicles sport utility vehicles  DODGE STRATUS 1999 90000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. <b>Current value of th</b> e
Cars,  Cars,  N  3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors, o es  Make:  Model:  Year:  Approximate mileage:  Other information:	al or equitable interes. If you lease a vehicles sport utility vehicles  DODGE STRATUS 1999 90000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D; ms Secured by Property.  Current value of the portion you own?  \$ 888,00
ou own Cars, N X Y	own, lease, or have leg that someone else drive vans, trucks, tractors, o es  Make:  Model:  Year:  Approximate mileage:  Other information:	al or equitable interes. If you lease a vehicles sport utility vehicles  DODGE STRATUS 1999 90000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 888.00	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$ 888.00
Cars,  Cars,  N  3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors, o es  Make: Model: Year: Approximate mileage: Other information:	al or equitable interes. If you lease a vehicles sport utility vehicles  DODGE STRATUS 1999 90000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 888.00  Do not deduct secured class amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$ 888.00  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
Cars,  Cars,  N  3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors, o es  Make: Model: Year: Approximate mileage: Other information:  own or have more than Make: Model: Year:	al or equitable interes. If you lease a vehicles sport utility vehicles  DODGE STRATUS 1999 90000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ 888.00  Do not deduct secured class the amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$ 888.00  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
ou own Cars, N S 7	own, lease, or have leg that someone else drive vans, trucks, tractors, o es  Make: Model: Year: Approximate mileage: Other information:	al or equitable interes. If you lease a vehicles sport utility vehicles  DODGE STRATUS 1999 90000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?  \$ 888.00  Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$ 888,00  aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of the

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Bogart Last Name

Anthony

Debtor 1

Vernon

Middle Name

3.3.	Make:  Model:	Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
	Year:	Debtor 2 only	Current value of the	
		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Approximate mileage:	At least one of the debtors and another	, , , , ,	. ,
	Other information:	7	\$	\$
		Check if this is community property (see instructions)	V	
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
J.4.		Debtor 1 only	the amount of any secured Creditors Who Have Clain	
	Model:	Debtor 2 only	Creditors vviid Have Claim	ns secured by Froperty.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of th
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		☐ Check if this is community property (see	\$	\$
		instructions)		
xar 1	No	watercraft, fishing vessels, snowmobiles, motorcycle accesso		
Vate Exar	volo Ves	watercraft, fishing vessels, snowmobiles, motorcycle accesso  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		d claims on <i>Schedule D</i> ns Secured by Property.
xar XIII	No /es Make: Model: Year:	Who has an interest in the property? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule in Secured by Propert  Current value of
ixar i N i N	Make:  Model: Other information:  u own or have more than one, list here:  Make: Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$  Do not deduct secured clathe amount of any secure Creditors Who Have Clair.	d claims on Schedule Ens Secured by Property  Current value of t portion you own?  \$
Exar □ \ 1.1.	Make:  Make:  Model:  Year:  Other information:  u own or have more than one, list here:  Make:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair.  Current value of the entire property?  \$ Do not deduct secured clathe amount of any secure Creditors Who Have Clair	d claims on Schedule Ens Secured by Property  Current value of t portion you own?  \$
	Make: Model: Other information:  u own or have more than one, list here: Make: Model: Year: Year:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Clair.  Current value of the entire property?  \$  Do not deduct secured clathe amount of any secure Creditors Who Have Clair  Current value of the	d claims on Schedule Ens Secured by Property  Current value of the portion you own?  \$

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Debtor 1

Anthony Vernon
First Name Middle Name

Bogart Last Name

Case number (if known)

P	Describe Your Personal and Household Items	
Do	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	No Yes. Describe PERSONAL HOUSEHOLD GOODS FOR A FAMILY OF 4, INCLUDING BUT NOT LIMITED TO See Attachment 1	\$ <u>1,050.00</u>
7.	Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	X No	
	Yes. Describe	\$
8,	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No	
	Yes. Describe COIN COLLECTION; PERSONAL CONSOLE/VIDEO GAMES	\$ 1,010.00
9	Equipment for sports and hobbies	**************************************
٠.	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	No No	marks for the control of the control
	Yes. DescribeHOBBY EQUIPMENT	\$ <u>50.00</u>
10	). Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	☑ No ☐ Yes. Describe	
	Tes. Describe	\$
11	. Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	No Personal CLOTHING FOR A FAMILY OF 4	
	Yes, Describe	\$ <u>100.00</u>
12	e. <b>Jewetry</b> Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	□ No	
	Yes. DescribePERSONAL JEWELRY	<u>\$ 150.00</u>
13	s. Non-farm animals  Examples: Dogs, cats, birds, horses	
	☑ No	
	Yes. Describe	\$
14	. Any other personal and household items you did not already list, including any health aids you did not list	
	☑ No	
	Yes. Give specific	\$
	Information	Ψ
15	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$2,360.00
	101   Art of Trine tildt lidlinger nere	

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Debtor 1

Anthony Vernon Bogart Last Name

Case number (if known)

16. Cash  Examples: Money you ha   No  Yes  17. Deposits of money  Examples: Checking, say	vings, or other financial accou	any of the following?  The ine in a safe deposit box, and on hand when you file your petition  Cash:	Current value of the portion you own?  Do not deduct secured claims or exemptions.  \$
Examples: Money you ha  No Yes  17. Deposits of money Examples: Checking, say and other sim	vings, or other financial accou illar institutions. If you have m 17.1. Checking account: 17.2. Checking account: 17.3. Savings account:	Ints; certificates of deposit; shares in credit unions, brokerage houses, ultiple accounts with the same institution, list each.  Institution name:  STANDARD BANK AND TRUST	\$ 150.00 \$
No Yes  17. Deposits of money Examples: Checking, say and other sim	vings, or other financial accou illar institutions. If you have m 17.1. Checking account: 17.2. Checking account: 17.3. Savings account:	Ints; certificates of deposit; shares in credit unions, brokerage houses, ultiple accounts with the same institution, list each.  Institution name:  STANDARD BANK AND TRUST	\$ 150.00 \$
☐ Yes  17. Deposits of money  Examples: Checking, save and other sime	vings, or other financial accou iilar institutions. If you have m 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account:	ints; certificates of deposit; shares in credit unions, brokerage houses, ultiple accounts with the same institution, list each.  Institution name:  STANDARD BANK AND TRUST	\$ 150.00 \$
17. <b>Deposits of money</b> <i>Examples</i> : Checking, save and other sime	vings, or other financial accou iilar institutions. If you have m 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account:	ints; certificates of deposit; shares in credit unions, brokerage houses, ultiple accounts with the same institution, list each.  Institution name:  STANDARD BANK AND TRUST	\$ 150.00 \$
Examples: Checking, saven and other sim  No	uilar institutions. If you have m  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:	ultiple accounts with the same institution, list each.  Institution name:  STANDARD BANK AND TRUST	\$
<del></del>	17.2. Checking account: 17.3. Savings account: 17.4. Savings account:	STANDARD BANK AND TRUST	\$
	17.2. Checking account: 17.3. Savings account: 17.4. Savings account:		\$
	17.2. Checking account: 17.3. Savings account: 17.4. Savings account:		\$
	17.3. Savings account: 17.4. Savings account:		\$ \$
	17.4. Savings account:		\$
	-		
	17.5 Certificates of denosit:		\$
	17.5. Octaioates of deposit		\$
	17.6. Other financial account:		\$
	17.7. Other financial account:		\$
	17.8. Other financial account:		\$
	17.9. Other financial account:		\$
⊠ No	•	erage firms, money market accounts	
<b>—</b> 163			¢.
			\$ \$
			•
19. Non-publicly traded sto		rated and unincorporated businesses, including an interest in	
⊠ No	Name of entity:	% of ownership:	
Yes. Give specific information about		%	\$
them		%	\$
			\$

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1	Anthony	Vernon	Bogart	Case number (if known)
-	First Name	Middle Name	Last Name	_

	**************************************	44.75.100.97.200.900.900.900.900.900.900.900.900.900	
=		ther negotiable and non-negotiable instruments	
Negotiable instruments Non-negotiable instrun	s include personal ch nents are those you o	necks, cashiers' checks, promissory notes, and money orders.  cannot transfer to someone by signing or delivering them.	
No Yes. Give specific information about them	Issuer name:		\$
010111.			\$
			\$
ŕ		. 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
No     Yes. List each     ∴			
account separately	Type of account:	Institution name:	
	401(k) or similar pla	in:	\$
	Pension plan:		\$
	IRA:		\$
	Retirement account		\$
	Keogh:		\$
	Additional account:		\$
	Additional account:		\$
Your share of all unuse Examples: Agreements companies, or others	ed deposits you have s with landlords, prep	e made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications	
☐ Yes		Institution name or individual:	
	Electric:		\$
	· Gas;		\$
	Heating o∄:		\$
	Security deposit on	rental unit:	\$
	Prepaid rent:		\$
	Telephone:		\$
	Water:		\$
	Rented furniture:		\$
			_
23. <b>Annuities</b> (A contract	Rented furniture: Other:	ent of money to you, either for life or for a number of years)	\$
23. <b>Annuities</b> (A contract	Rented furniture: Other:		\$
	Rented furniture: Other: for a periodic payme	ent of money to you, either for life or for a number of years)	\$
☑ No	Rented furniture: Other: for a periodic payme	ent of money to you, either for life or for a number of years)	\$

Debtor

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Case number (if known)

Document

Bogart

Anthony

Debtor 1

Vernon

Middle Name

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☑ No. 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☑ No ☐ Yes. Give specific \$ information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☑ No ☐ Yes. Give specific \$ information about them. 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☑ No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ Yes. Give specific information Federal: about them, including whether State: you already filed the returns and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☑ No Yes. Give specific information.....

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Bogart

Anthony

Debtor 1

Vernon

31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company Surrender or refund value: Beneficiary: Company name: of each policy and list its value. .. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☑ No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ⊠ No ☐ Yes, Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☑ No. Yes. Describe each claim..... 35. Any financial assets you did not already list ☑ No ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$150.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes, Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☑ No Yes. Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☑ No ☐ Yes. Describe....

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Bogart Anthony Vernon Case number (if known)\_ Debtor 1 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☑ No ☐ Yes, Describe.... 41. Inventory ☑ No ☐ Yes. Describe.... 42. Interests in partnerships or joint ventures ⊠ No ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☑ No. Yes. Describe...... 44. Any business-related property you did not already list ■ No. ☐ Yes. Give specific information ..... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$0.00 for Part 5. Write that number here ...... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ☑ No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47 Farm animals Examples: Livestock, poultry, farm-raised fish X No Q Yes.....

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Page 17 of 64 Document Anthony First Name Bogart Last Name Vernon Case number (if known)

Debtor 1

	3
48. Crops—either growing or harvested	
☑ No ☐ Yes. Give specific	
information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
☑ No ☐ Yes	
	\$
50. Farm and fishing supplies, chemicals, and feed	
☑ No	
☐ Yes	\$
51. Any farm- and commercial fishing-related property you did not already list	Y
No	
Yes. Give specific	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
Down I was the constant of any bland year of the production?	
53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	
⊠ No	\$
Yes. Give specific information,	\$
	\$
54, Add the dollar value of all of your entries from Part 7. Write that number here	\$
54, Add the dollar value of an of your entries from Part 7. Write that number nere	7
30 No. 2010 (1997) 1997 1997 1997 1997 1997 1997 1997	
Part 8: List the Totals of Each Part of this Form	
55. Part 1: Total real estate, line 2	<u>\$87,117.00</u>
56. Part 2: Total vehicles, line 5 \$888.00	
57. Part 3: Total personal and household items, line 15 \$2,360.00	
58. Part 4: Total financial assets, line 36 \$150.00	
59. Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 + \$0.00	
62. Total personal property. Add lines 56 through 61. \$3,398.00 Copy personal property total	+\$3,398.00
63, Total of all property on Schedule A/B. Add line 55 + line 62	\$90,515.00
So. Total C. E. Property Cit Communication Co.	-

Attachment
Debtor: Anthony Vernon Bogart Case No:

#### Attachment 1

HOUSEHOLD FURNITURE, APPLIANCES, ELECTRONICS, AND LIVING AND BEDROOM SETS; PERSONAL HOUSEHOLD OFFICE EQUIPMENT, INCLUDING COMPUTER, DESK, CHAIR, PRINTER; PERSONAL HOUSEHOLD MACHINER, INCLUDING HARD AND POWER TOOLS, AND AUTOMOTIVE TOOLS

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Fill in this i	nformation to id	entify your case:		
Debtor 1	Anthony First Name	Vernon Middle Name	Bogart East Name	
Debtor 2	Minara	Marie	Bogart	
(Spouse, if filing		Middle Name for the: Northern Dist	Last Name rict of Illinois	
United States	s Bankruptcy Court f	or the: Northern Distr	ict of infilois	
Case numbe (If known)	r		<del></del>	

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

: 4	art 11 Identii	fy the Property You Claim	as Exempt					
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.  ☑ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any proper	ty you list on Schedule A/B t	hat you claim as exem	pt, fill in the information below.				
		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
			Copy the value from Schedule A/B	Check only one box for each exemption.				
	Brief description:	See Attachment 1	\$ <u>1,500.00</u>	⊠ \$ <u>1,500.00</u>	735 ILCS 5/12-1001(c)			
	Line from Schedule A/B:	3.1		☐ 100% of fair market value, up to any applicable statutory limit				
	Brief description:	See Attachment 2	\$ <u>150.00</u>	☑ \$ 150.00	735 ILCS 5/12-1001(b)			
	Line from Schedule A/B:	17.1		100% of fair market value, up to any applicable statutory limit				
	Brief description:	See Attachment 3	\$_1,500.00	X \$ 1,500.00	735 ILCS 5/12-1001(b)			
	Line from Schedule A/B:	6		100% of fair market value, up to any applicable statutory limit				
3.	•	ng a homestead exemption o		es filed on or after the date of adjustment.	)			
	<ul><li>☒ No</li><li>☐ Yes. Did yo</li></ul>	u acquire the property covered	by the exemption within	1,215 days before you filed this case?				
	☐ No ☐ Yes							

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Debtor 1

Anthony	Vernon Bogart		Case number (if known)	_
irst Name	Middle Name	Last Name		

	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	See Attachment 4	\$ 1,000.00	☒ \$ 1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	8		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	See Attachment 5	\$ <u>100.00</u>	☒ \$	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	11		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	PERSONAL JEWELRY	<u>\$ 150.00</u>	☑ \$ 150.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	12		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	HOBBY EQUIPMENT	<b>\$</b> 50.00	<b>☒</b> \$ 50.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	9		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	See Attachment 6	\$ 250.00	⊠ \$	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	6		☐ 100% of fair market value, up to any applicable statutory limit	
Brief	See Attachment 7	<b>\$</b> 200.00	☒ \$	735 ILCS 5/12-1001(b)
description: Line from Schedule A/B:	6	*	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<b>□</b> \$	
Line from Schedule A/B:		pr.   pr. 100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100   100	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	<b></b>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	

☐ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

Brief description:

## Attachment Debtor: Anthony Vernon Bogart Case No:

Attachment 1

1999 DODGE STRATUS with 90000 miles.

Attachment 2

Checking Account with STANDARD BANK AND TRUST

Attachment 3

PERSONAL HOUSEHOLD GOODS FOR A FAMILY OF 5, INCLUDING BUT NOT LIMITED TO HOUSEHOLD FURNITURE, APPLIANCES, ELECTRONICS, AND LIVING AND BEDROOM SETS

Attachment 4

PERSONAL CONSOLE/VIDEO GAMES

Attachment 5

PERSONAL CLOTHING FOR A FAMILY OF 5

Attachment 6

PERSONAL HOUSEHOLD OFFICE EQUIPMENT, INCLUDING COMPUTER, DESK, CHAIR, PRINTER

Attachment 7

PERSONAL HOUSEHOLD MACHINER, INCLUDING HARD AND POWER TOOLS, AND AUTOMOTIVE TOOLS

Fill in this in	formation to i	identify your case:		
Debtor 1	Anthony Ve	rnon Bogart		
	First Name	Middle Name	Last Name	
Debtor 2	Minara Ma	rie Bogart		
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: Northern District of Illinois				
Case number (If known)				

Check if this is an amended filing

#### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

4	Do any	creditors l	have	claims	secured	by v	/OHF	property	<b>v?</b>
1.	DUBLEY	CIEUIIOISI	lave	Cialitis	360uleu	W 1	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PIOPOIL	* :

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

for each claim. If more than one creditor has	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 PERSONAL FINANCE COMPANY, LLC	Describe the property that secures the claim:	\$ 4,858.58	\$ 600.00	\$ 4,250.00
Creditor's Name 100 COMMERCIAL DR. #4 Number Street	PERSONAL HOUSEHOLD GOODS FOR A FAMILY See Attachment 1			
MORRIS IL 60450 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	-		
community debt  Date debt was incurred	Last 4 digits of account number 1 0 _ 1		Value	
2.2 SPRINGLEAF	Describe the property that secures the claim:	\$ 5,870.72	\$ 888.00	\$ <u>4,982.72</u>
Creditor's Name C/O ONE MAIN Number Street	1999 DODGE STRATUS with 90000 miles.	]		
2149 W. JEFFERSON ST.  JOLIET IL 60435 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	not.		
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred 10/12/2015	□ An agreement you made (such as mortgage or secured car loan)     □ Statutory lien (such as tax lien, mechanic's lien)     □ Judgment lien from a lawsuit     □ Other (including a right to offset)     □ Last 4 digits of account number 1 2 0 2			
	Column A on this page. Write that number here:	<b>s</b> 10,729.30		Olicus de contra este en contra esta esta esta esta esta esta esta est
Add the dollar value of your entries in	Column A on this page, write that number here.			

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Debte	or 1 Anthony Vernon Bogart First Name Middle Name								
Pa	Additional Page  After listing any entries on this p by 2.4, and so forth.	age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any				
23	WELLS FARGO HOME MORTGAGE	Describe the property that secures the claim:	\$ 97,128.17	\$ <u>87,117.00</u>	\$ 10,011.17				
	P.O. BOX 10335  Number Street								
+	DES MOINES IA 50306 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed							
٧	Who owes the debt? Check one.	Nature of lien. Check all that apply.							
[	Debtor 1 only	An agreement you made (such as mortgage or secured)							
_	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)	_						
Į	☐ Check if this claim relates to a community debt								
	Date debt was incurred	Last 4 digits of account number 3 2 0 7							
24		Describe the property that secures the claim:	\$	\$	\$				
	Creditor's Name								
	Number Street								
		As of the date you file, the claim is: Check all that apply.  Contingent							
		Unliquidated							
	City State ZIP Code	☐ Disputed							
١	Who owes the debt? Check one.	Nature of lien. Check all that apply.							
(	Debtor 1 only	☐ An agreement you made (such as mortgage or secured							
i .	Debtor 2 only	car loan)							
1	Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit							
,	At least one of the debtors and another								
Ţ	<ul> <li>Check if this claim relates to a community debt</li> </ul>	Since (modaling a right to shoot)	_						
ı	Date debt was incurred	Last 4 digits of account number			The second of th				
25		Describe the property that secures the claim:	\$	<b>.</b> \$	\$				
	Creditor's Name		7						
	Number Street								
		As of the date you file, the claim is: Check all that apply	_ <u></u>						
		☐ Contingent							
	City State ZIP Code	Unliquidated Disputed							
,	Who owes the debt? Check one.	Nature of lien. Check all that apply.							
	Debtor 1 only	An agreement you made (such as mortgage or secured)							
1 .	Debtor 2 only	car loan)							
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit							
	At least one of the debtors and another     Check if this claim relates to a	Other (including a right to offset)	_						
	community debt	Last 4 digits of account number							
	Date debt was incurred	•		٦					
		s in Column A on this page. Write that number here	\$97,128.17	=					
	If this is the last page of your form,	add the dollar value totals from all pages.	\$ 107,857.47						

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ebtor 1	Anthony Vernon Bogart	Last Name		Case number (if known)
Part 2:	List Others to Be Notific	ed for a Deb	t That You Aiready I	Listed
agency is you have	trying to collect from you for a	debt you owe t of the debts tha	o someone else, list the at you listed in Part 1, lis	debt that you already listed in Part 1. For example, if a collection creditor in Part 1, and then list the collection agency here. Similarly, if the additional creditors here. If you do not have additional persons to
ONE Name	EMAIN			On which line in Part 1 did you enter the creditor? 2.2  Last 4 digits of account number 1 - 0 1
	BOX 790368 er Street			Last 4 digits of account number 1
ST. I	LOUIS	MO State	63179-0368 ZIP Code	
COE	DILIS & ASSOCIATES, P.	C.	and the second s	On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number 1 2 0 2
15W Numbe	/030 NORTH FRONTAGE er Street	RD., SUIT	E 100	<u> </u>
BUR	RR RIDGE	IL State	60527 ZIP Code	
WEI Name	LLS FARGO HOME MOR	TGAGE		On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number 1 2 0 2
P.O.	BOX 14538 er Street			
DES City	MOINES	IA State	50306 ZIP Code	
			a wang kakasi gi di Lili San Masaman pejamba pangunan pamanan an ana anamanan manan an anaman ang manan ang ma	On which line in Part 1 did you enter the creditor?
Name	0			Last 4 digits of account number
Numbe	er Street			
City		State	ZIP Code	
Name				On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
Numbe	er Street		1.00	·
÷				
City	ээр үүрэг үүр үүр үүр үүр үүр үүр үүр үүр үүр үү	State	ZIP Code	
Name				On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
Numbe	er Street			
			710.0	
City		State	ZIP Code	

Attachment
Debtor: Anthony Vernon Bogart Case No:

Attachment 1

OF 4, INCLUDING BUT NOT LIMITED TO HOUSEHOLD FURNITURE, APPLIANCES, ELECTRONICS, AND LIVING AND BEDROOM SETS

Case 17-01124 Doc 1 Filed 01/13/17 Entered 01/13/17 22:34:08 Fill in this information to identify your case: Anthony Vernon Bogart Debtor 1 Minara Marie Bogart Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority Total claim amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ☐ Other, Specify ☐ No Yes 2.2 Last 4 digits of account number \_\_\_\_ \$ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other. Specify Is the claim subject to offset?

☐ No ☐ Yes

### Case 17,01124 Doc 1 Filed 01/13/17 Entered 01/13/17 22:34:08 Desc Main First Name Middle Name Last Name Document Page 27 of 64

Pa	rt 2: List All of Your NONPRIOR	ITY Unsecured Claims		
3.	Do any creditors have nonpriority uns	ecured claims against you?		
	<ul><li>No. You have nothing to report in this</li><li>X Yes</li></ul>	s part. Submit this form to the	court with your other schedules.	
	List all of your nonpriority unsecured or priority unsecured claim. list the creditor	separately for each claim. For	rder of the creditor who holds each claim. If a creditor has each claim listed, identify what type of claim it is. Do not list of the other creditors in Part 3.If you have more than four prior	claims already
				Total claim
.1	ADVENTIST HINSDALE HOSE Nonpriority Creditor's Name	PITAL		\$35.62
	See Attachment 1		When was the debt incurred?	
	CHICAGO IL	60604-4318 State ZIP Code	As of the date you file, the claim is: Check all that apply.	
,	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only		☐ Contingent ☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:  Student loans	
	☐ Check if this claim is for a commun	ity debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	e <sup>t</sup>
	Is the claim subject to offset?  ☑ No ☑ Yes		□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services	
.2	ASSOCIATES PATHOLOGIST Nonpriority Creditor's Name		Last 4 digits of account number 7 5 2 7  When was the debt incurred?	<u>\$ 526.00</u>
	C/O FROST - ARNETT COMPA	37219-8988	As of the date you file, the claim is: Check all that apply.	
		State ZIP Code	Contingent Unliquidated	
	Debtor 1 only Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	<ul><li> ☐ At least one of the debtors and another</li><li>☐ Check if this claim is for a commun</li></ul>	nity debt	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	ls the claim subject to offset? ☑ No	•	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services	
	☐ Yes			
1.3	ATG CREDIT Nonpriority Creditor's Name		Last 4 digits of account number	\$ 139.00
	1700 W. CORLAND ST., SUIT	E 201	When was the debt incurred?	
	CHICAGO IL	60622 State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.		☐ Contingent ☐ Unliquidated	
	Debtor 1 only Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	-24	Student loans	
	Check if this claim is for a commun	nty debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?  ☑ No ☐ Yes		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical Services	

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Your NONPRIORITY Unsecured Claims —Continuation Page

Afte	r listing any entries on this page, number them beginning with 4	.5, followed by 4.6, and so forth.	Total claim
4.4	CAPITAL ONE BANK (USA), N.A.	Last 4 digits of account number	\$ <u>2,040.73</u>
	Nonpriority Creditor's Name P.O. BOX 6492	When was the debt incurred?	
	Number Street CAROL STREAM IL 60197	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim:	одерення в принценти в принцен
	At least one of the debtors and another  Check if this claim is for a community debt	<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	THE PERSON AND AND AND AND AND AND AND AND AND AN
	Is the claim subject to offset?  ☑ No ☑ Yes	Other. Specify Credit Card Charges	
4.5	COMENITY BANK Nonpriority Creditor's Name	Last 4 digits of account number 0 6 3 6	<u>\$ 2,054.74</u>
	BANKRUPTCY DEPARTMENT P.O. BOX 182125	When was the debt incurred?	
	Number         Street           COLUMBUS         OH         43218-2125           City         State         ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent	THE PROPERTY OF THE PROPERTY O
	Who incurred the debt? Check one.  Debtor 1 only	☐ Unliquidated ☐ Disputed	LA ANDROPE AND A BANKANIA AND A BANK
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	***************************************
	At least one of the debtors and another	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card Charges	
	☑ No ☐ Yes		
4.6	CREDITOR'S DISCOUNT AND AUDIT CO.	Last 4 digits of account number	\$ 15,237.00
	Nonpriority Creditor's Name 415 E. MAIN ST.	When was the debt incurred?	
	Number         Street           STREATOR         IL         61364           City         State         ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	a managari propi
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans  Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Medical Services	
	No     ☐ Yes	Califi. Oponly	_

Debtor 1	Case 17-01124 Doc 1 Filed 01/13/17 Entered 01/13/17 22:34:08 Anthony Vernon Bogart Document Page 29 of 64 number (# known)	Desc Main	
Part 2:	Your NONPRIORITY Unsecured Claims —Continuation Page		
After listi	ing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total

Afte	r listing any entries on this page, number them beginning with 4.	.5, followed by 4.6, and so forth.	Total claim
4.7	EPIC GROUP, S.C.	Last 4 digits of account number	\$ 759.56
	Nonpriority Creditor's Name P.O. BOX 88087	When was the debt incurred?	
	Number Street CHICAGO IL 60680-1087	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	<ul> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>□ Other. Specify Medical Services</li> </ul>	
4.8	MIRAMED REVENUE GROUP	Last 4 digits of account number	\$ 7,107.00
	Nonpriority Creditor's Name  991 OAK CREEK DR.	When was the debt incurred?	I I I I I I I I I I I I I I I I I I I
	Number Street LOMBARD IL 60148	As of the date you file, the claim is: Check all that apply.	ALTERNATION AND THE PARTY OF TH
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	□ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical Services	yymgyyyhire sii analakkiideasantee
4.9	MORRIS HOSPITAL BUSINESS OFFICE Nonpriority Creditor's Name	Last 4 digits of account number	\$ 2,886.31
	150 W. HIGH ST.	When was the debt incurred?	
	MORRIS         IL         60450-1497           City         State         ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical Services	

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			1990, 1993 (N. 100, 10.30) (1. 10.30)
Afte	r listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.10	ORTIZ EYE ASSOCIATES	Last 4 digits of account number	\$ <u>516.13</u>
	Nonpriority Creditor's Name See Attachment 2	When was the debt incurred?	
	Number         Street           MORRIS         IL         60450           City         State         ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Check if this claim is for a community debt  Is the claim subject to offset?	<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>□ Other. Specify Medical Services</li> </ul>	
	☑ No □ Yes		
4.11	PRESENCE SAINT JOSEPH MEDICAL CENTER	Last 4 digits of account number 5 6 7 2	\$ 141.84
	Nonpriority Creditor's Name 32814 COLLECTION CENTER DR.	When was the debt incurred?	
	Number Street CHICAGO IL 60693-0328	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code  Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	you did not report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other, Specify Medical Services	
	☑ No ☐ Yes		
4.12	TEK COLLECT	Last 4 digits of account number	\$ 95.00
	Nonpriority Creditor's Name P.O. BOX 1269	When was the debt incurred?	
	Number Street COLUMBUS OH 43216	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code  Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  ☑ No ☐ Yes	☑ Other, Specify UTILITY	
	- CONTROL OF THE PROPERTY OF T		_

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Your NONPRIORITY Unsecured Claims —Continuation Page

Afte	r listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.13	VASECTOMY SPECIALIST CLINICS OF CHICAGO, Nonpriority Creditor's Name	LTD Last 4 digits of account number 0 0 7 8	<u>\$ 562.58</u>
	111 N. WABASH AVE., SUITE 1210	When was the debt incurred?	
	Number Street CHICAGO IL 60602	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code  Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 only	☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:  Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical Services	
	Is the claim subject to offset?  No	Other. Specify Medical Services	
	☐ Yes		
4.14		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	•
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	☐ No ☐ Yes		
4.15		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	☐ Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	□ No □ Yes		

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Part 3: List Others to Be Notified About a Debt That You Already Listed

CHICAGO, IL 60675-3250  CREDITOR'S DISCOUNT & AUDIT CO.  Nominator Success  CREDITOR'S DISCOUNT & AUDIT CO.  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  STREATOR, Illinois 61364-0213  City Suso ZP Code  MICHAEL R. NAUGHTON  Number Succes  MANHATTAN, IL 60442  Typ Code  Angela Fillenwarth  Number Succes  MANHATTAN, IL 60442  Typ Code  Angela Fillenwarth  Number Succes  Claims  Last 4 digits of account number   Part 1: Creditors with Priority Unsecured Claims  Manhattan   Part 2: Creditors with Nonpriority Unsecured Claims  Claim	ADVENTIST HINSDALE HOSPITAL	On which entry in Part 1 or Part 2 did you list the original creditor?
Part 2: Creditors with Nonpriority Unsecured Claims		Line 4.1 of (Check one): Deart 1: Creditors with Priority Unsecured Claims
CHICAGO, IL 60675-3250  State 2P Code  CREDITOR'S DISCOUNT & AUDIT CO.  CREDITOR'S DISCOUNT & AUDIT CO.  Line 4.9 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  STREATOR, Illinois 61364-0213  Giy State 2P Code  MICHAEL R. NAUGHTON  MICHAEL R. VAIGHT A OF Part 2 did you list the original creditor?  Line 4.10 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number   Part 2 did you list the original creditor?  Line 4.10 of (Check one):   Part 1: Creditors with Nonpriority Unsecured Claims  MICHAEL R. NAUGHTON		Part 2: Creditors with Nonpriority Unsecured Clain
CHICAGO, IL 60675-3250  State 2P Code  CREDITOR'S DISCOUNT & AUDIT CO.  CREDITOR'S DISCOUNT & AUDIT CO.  Line 4.9 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  STREATOR, Illinois 61364-0213  Giy State 2P Code  MICHAEL R. NAUGHTON  MICHAEL R. VAIGHT A OF Part 2 did you list the original creditor?  Line 4.10 of (Check one):   Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number   Part 2 did you list the original creditor?  Line 4.10 of (Check one):   Part 1: Creditors with Nonpriority Unsecured Claims  MICHAEL R. NAUGHTON		
CREDITOR'S DISCOUNT & AUDIT CO.  Name  4.15 E. MAIN ST.  Line 4.9 of (Check one): □ Part 2: Creditors with Priority Unsecured Claims  STREATOR, Illinois 61364-0213  Cigr Simin 2P Code  MICHAEL R. NAUGHTON  Number Street  DO which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one): □ Part 1: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number □  Do which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  MANHATTAN, IL 60442  Cigy State ZIP Code  Claims  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.10 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Line 4.10 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Line 4.10 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Claims  Claims  Claims  Claims  Claims  Line 4.10 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Line 4.10 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims		Last 4 digits of account number 4 4 0 0
Line 4.9 of (Check one):   Part 1: Creditors with Priority Unsecured Claims	City State ZIP Code	
Line 4.9 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Part 2: Creditors with Nonpriority Unsecured Part 3: Creditors with Nonpriority Unsecured Part 3: Creditors with Nonpriority Unsecured Part 3: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 3: Creditors with Priority Unsecured Claims   Part 4: Creditors with Priority Unsecured Claims   Part 5: Creditors wit	· · · · · · · · · · · · · · · · · · ·	On which entry in Part 1 or Part 2 did you list the original creditor?
Part 2: Creditors with Nonpriority Unsecured Claims   Claims   Last 4 digits of account number   Part 2: Creditors with Nonpriority Unsecured Claims   Last 4 digits of account number   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claim		Line 4.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
STREATOR, Illinois 61364-0213  City State ZIP Code  MICHAEL R. NAUGHTON  On which entry in Part 1 or Part 2 did you list the original creditor?  Name  P.O. BOX 10  Number Street  Claims  MANHATTAN, IL 60442  City State ZIP Code  Angela Fillenwarth Name  Boggs and Fillenwarth, Ltd.  Number Street  Claims  Morris, IL 60450  City State ZIP Code  City State ZIP Code  Claims		, ,
City   State   ZIP Code	P.O. BOX 213	Claims
P.O. BOX 10   Line 4.9 of (Check one):   Part 1: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Priority Unsecured Claims   Part 3: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Nonpriority Unsecured Claims   Part 3: Creditors with Nonpriority Unsecured Claims   Part 4: Creditors with Nonpriority Unsecured Claims   Part 5: Creditors with Nonpriority Unsecured Claims   Part 4: Creditors with Nonpriority Unsecured Claims   Part 5: Creditors with Nonpriority Unsecured Claims   Part 6: Creditors with Nonpriority Unsecured Claims   Part 7: Creditors wi		Last 4 digits of account number
P.O. BOX 10		On which entry in Part 1 or Part 2 did you list the original creditor?
NANHATTAN, IL 60442  City State ZIP Code  Angela Fillenwarth Neme  Boggs and Fillenwarth, Ltd. Number Street  211 E. Jefferson St., #A  Morris, IL 60450  City State ZIP Code  Claims  Last 4 digits of account number		Line 4.9 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims
Last 4 digits of account number		•
City State ZIP Code  Angela Fillenwarth Name  Boggs and Fillenwarth, Ltd. Number Street  211 E. Jefferson St., #A  Morris, IL 60450 City State ZIP Code  See Attachment 3 Name  Street  Street  Street  City State  Claims  Claims  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Name  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Name  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.13 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims On which entry in Part 1 or Part 2 did you list the original creditor?  Last 4 digits of account number 0 0 7 8  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Claims  Last 4 digits of account number 0 Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Claims  Last 4 digits of account number  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number  Claims  Last 4 digits of account number  Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number  Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims		GairtiS
Angela Fillenwarth Name  Boggs and Fillenwarth, Ltd.  Boggs and Fillenwarth Anders with Nonpriority Unsecured Claims		Last 4 digits of account number
Line   4.10 of (Check one):   Part 1: Creditors with Priority Unsecured Claims		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street		
Claims   C	Boggs and Fillenwarth, Ltd.	Line 4.10 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Morris, IL 60450  City State ZIP Code  See Attachment 3 Name  1S 183 SUMMIT AVE. Number Street  Claims  CAKBROOK TERRACE, IL 60181 City State ZIP Code  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.13 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Claims  Check one): □ Part 2: Creditors with Nonpriority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Claims  Last 4 digits of account number 0 0 7 8		• •
See Attachment 3 Name  1S 183 SUMMIT AVE. Number Street  Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.13 of (Check one):  Part 1: Creditors with Priority Unsecured Claims Claims  OAKBROOK TERRACE, IL 60181 City State ZIP Code  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Nonpriority Unsecured  Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Line Part 2: Creditors with Priority Unsecured Claims		
Name  1S 183 SUMMIT AVE.  Number Street  Claims  CAKBROOK TERRACE, IL 60181  City State ZIP Code  Claims  Claims  Claims  Claims  Last 4 digits of account number _0 _0 _7 _8		Last 4 digits of account number
1S 183 SUMMIT AVE.  Number Street  Line 4.13 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  OAKBROOK TERRACE, IL 60181  City State ZIP Code  On which entry in Part 1 or Part 2 did you list the original creditor?  Name  Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Number Street  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): □ Part 2: Creditors with Nonpriority Unsecured Claims  Claims  Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured  Claims  Last 4 digits of account number Part 2: Creditors with Priority Unsecured Claims  Last 4 digits of account number Part 2 did you list the original creditor?  Name  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): □ Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Priority Unsecured Claims  Unsecured Claims		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street  Claims  Claims  Claims  Claims  Claims  Claims  Claims  Claims  Last 4 digits of account number 0 0 7 8 On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 2: Creditors with Priority Unsecured Claims  Claims  Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims  Claims  Last 4 digits of account number Part 2: Creditors with Priority Unsecured Claims  Claims  Last 4 digits of account number Part 2: Creditors with Priority Unsecured Claims  Claims  Last 4 digits of account number Part 1: Creditors with Priority Unsecured Claims  Number Street  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Number Street	1S 183 SUMMIT AVE.	Line 4.13 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
DAKBROOK TERRACE, IL 60181  City  State  City  C		
On which entry in Part 1 or Part 2 did you list the original creditor?    City   State   ZIP Code		Claims
On which entry in Part 1 or Part 2 did you list the original creditor?    Line of (Check one):		Last 4 digits of account number 0 0 7 8
Line of (Check one):   Part 1: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Name	Line of (Check one): Depart 1: Creditors with Priority Unsecured Claims
Claims  Last 4 digits of account number  On which entry in Part 1 or Part 2 did you list the original creditor?  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured	Number Street	
On which entry in Part 1 or Part 2 did you list the original creditor?    Name   Line of (Check one):   Part 1: Creditors with Priority Unsecured Claims   Part 2: Creditors with Nonpriority Unsecured		· · ·
Name  Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Number Street  Part 2: Creditors with Nonpriority Unsecured	City State ZIP Code	Last 4 digits of account number
Number Street Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured  Part 2: Creditors with Nonpriority Unsecured		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street  Part 2: Creditors with Nonpriority Unsecured	Name	
Part 2: Creditors with Nonpriority Unsecured	Number Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	idnings greet	☐ Part 2: Creditors with Nonpriority Unsecured Claims
	City State ZIP Code	Last 4 digits of account number

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\$32,101.51

Desc Main

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	<del>6</del> a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e. Total. Add lines 6a through 6d.	6e.	\$
			Total claim
Total claims	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g,	<u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>
	Other. Add all other nonpriority unsecured claims.     Write that amount here.	6i.	+ \$32,101.51

6j. Total. Add lines 6f through 6i.

# Attachment Debtor: Anthony Vernon Bogart Case No:

Attachment 1

C/O MALCOLM S. GERALD AND ASSOCIATES, INC. 33 SOUTH MICHIGAN AVE., SUITE  $600\,$ 

Attachment 2

C/O ANGELA M. FILLENWARTH 211 E. JEFFERSON ST., SUITE A

Attachment 3

VASECTOMY SPECIALISTS CLINICS OF CHICAGO LTD.

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Fill	in this ir	formation to identif	y your c	ase:			
Deb	otor	Anthony Vernon Bog					
	otor 2	First Name Minara Marie Bogai	rt	ile Name	Last Name		
	ouse If filing)	First Name  Bankruptcy Court for the		ne Name To District of Illinois	Last Name		
		Bankruptcy Court for the	110111101	Tr Blothet of Allihold		_	_
	se number :nown)						Check if this is an amended filing
							_
Off	ficial I	Form 106G					
Sc	hed	ule G: Exe	cuto	ory Contr	acts and	Unexpired Leases	12/15
infor addi 1.	mation. I tional pa Do you l	f more space is nee ges, write your nam nave any executory (	ded, cope and ca	oy the additional passe number (if kno s or unexpired lea	oage, fill it out, nur own). ases?	ether, both are equally responsible for sunber the entries, and attach it to this page	. On the top of any
						les. You have nothing else to report on this listed on Schedule A/B: Property (Official Fo	
	List sepa example unexpire	, rent, vehicle lease,	or comp cell phe	eany with whom yo one). See the instru	ou have the contra uctions for this form	act or lease. Then state what each contract in the instruction booklet for more examples	t or lease is for (for of executory contracts and
	Person o	or company with wh	om you	have the contract	or lease	State what the contract or lease is	s for
2.1							
	Name						
A demonstration	Number	Street					
	City		State	ZIP Code			
2.2	enfelde og enmet of enreg og par	rrocer filorechia i kontides e i iza kezi za Krizinież da czeprena z innemiew uz możnia fi nad		28 C 2000 C 2	950 A States Characteristica, actua da consenso a seguino y sec <sub>a</sub> gagas y 16 gangago		
	Name						
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outana de la constante de la c	Number	Street					
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	Name						
	Number	Street					
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2.5							
	Name						
	Number	Street					
	City		State	ZiP Code			

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Fill in this information to iden	tify your case:			
Debtor 1 Anthony Vernon B	Sogart Middle Name	Last Name		
Debtor 2 Minara Marie Bo (Spouse, if filing) First Name  United States Bankruptcy Court for t	Middle Name	Last Name	_	
Case number (If known)				☐ Check if this is an
Official Form 106H				amended filing
Schodula H: Vo	– ur Codebtoi	re		12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question

and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.		
	Do you have any codebtors? (If you are filing a joint case, do not list either spouse a  No  Yes	is a codebtor.)
2.	— 199 Within the last 8 years, have you lived in a community property state or territory Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Was	
	No. Go to line 3.	
	lacksquare Yes. Did your spouse, former spouse, or legal equivalent live with you at the time:	?
	□ No	
	Yes. In which community state or territory did you live?	. Fill in the name and current address of that person.
	Name of your spouse, former spouse, or legal equivalent	
	Number Street	
	City State ZIP Code	
	shown in line 2 again as a codebtor only if that person is a guarantor or cosigne Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor	· · · · · · · · · · · · · · · · · · ·
		Check all schedules that apply:
3.1		
	Name	Schedule D, line
		Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State ZIP Code	
3.2		
	Name	Schedule D, line
		Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State ZIP Code	
3.3		Cabadula D lina
	Name	Schedule D, line
	Mushes Christ	Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State ZIP Code	

page 1 of <u>1</u>

ll in this information to identify	your case:				
Anthony Vernon Bog	art Middle Name	Last Name			
ebtor 2 Minara Marie Bogart					
ocuse, if filling) First Name sited States Bankruptcy Court for the:	Middle Name  Northern District of Illinois	Łast Name			
	Notifie   District of History		Check if this is:		
se number known)			An amended	l filina	
1. 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			A supplemer	nt showing post-petition ncome as of the following	g date:
ficial Form 106l			MM / DD / YY	YY	
chedule I: You	ır İncome				12/15
olying correct information. If you are separated and your spou arate sheet to this form. On the	ou are married and not fili ise is not filing with you, o top of any additional pag	ng jointly, and your spous to not include information	e is living with you, inc about vour spouse. If	clude information about y more space is needed, at	our sp
as complete and accurate as post- plying correct information. If you are separated and your spoudarate sheet to this form. On the  Part 1: Describe Employr	ou are married and not fili ise is not filing with you, o top of any additional pag	ng jointly, and your spous to not include information	e is living with you, inc about vour spouse. If	clude information about y more space is needed, at	our spo
plying correct information. If you are separated and your spou arate sheet to this form. On the art 1: Describe Employr Fill in your employment information.	ou are married and not fili ise is not filing with you, o top of any additional pag	ng jointly, and your spous to not include information	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at	our spo tach a
plying correct information. If you are separated and your spou arate sheet to this form. On the art 1: Describe Employr  Fill in your employment	ou are married and not fili ise is not filing with you, o top of any additional pag	ng jointly, and your spous do not include information es, write your name and c	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at . Answer every question.	our spe tach a
plying correct information. If you are separated and your spou arate sheet to this form. On the art 1: Describe Employr  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional	ou are married and not filing is a series not filing with you, of top of any additional pagenent  Employment status	ng jointly, and your spous to not include information les, write your name and o  Debtor 1  Employed	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at . Answer every question.  Debtor 2 or non-filing spo	our spe tach a
plying correct information. If you are separated and your spou arate sheet to this form. On the art 1: Describe Employr  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or	ou are married and not filing is a second filing with you, of top of any additional pagenent  Employment status  Occupation	ng jointly, and your spous to not include information les, write your name and o  Debtor 1  Employed	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at . Answer every question.  Debtor 2 or non-filing spo	our spe tach a
plying correct information. If you are separated and your spou arate sheet to this form. On the art 1: Describe Employr  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may Include student	ou are married and not filing is a second filing with you, of top of any additional pagenent  Employment status  Occupation	ng jointly, and your spous to not include information les, write your name and o  Debtor 1  Employed	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at . Answer every question.  Debtor 2 or non-filing spo	our spo
plying correct information. If you are separated and your spou arate sheet to this form. On the art 1: Describe Employr  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may Include student	ou are married and not filing is a second filing with you, of top of any additional pagenent  Employment status  Occupation	ng jointly, and your spous to not include information les, write your name and o  Debtor 1  Employed	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at i. Answer every question.  Debtor 2 or non-filling spo  Employed  Not employed	our spo
plying correct information. If you are separated and your spou arate sheet to this form. On the lart 1: Describe Employr  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may Include student	ou are married and not filing is a second filing with you, of top of any additional pagement  Employment status  Occupation  Employer's name	ng jointly, and your spous to not include information les, write your name and o  Debtor 1  Employed	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at . Answer every question.  Debtor 2 or non-filing spo	our spo
plying correct information. If you are separated and your spou arate sheet to this form. On the lart 1: Describe Employr  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may Include student	ou are married and not filing is a second filing with you, of top of any additional pagement  Employment status  Occupation  Employer's name	ng jointly, and your spous to not include information tes, write your name and o  Debtor 1  Employed  Not employed	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at i. Answer every question.  Debtor 2 or non-filling spo	our spo tach a
art 1: Describe Employr  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may Include student	ou are married and not filing is a second filing with you, of top of any additional pagement  Employment status  Occupation  Employer's name	ng jointly, and your spous to not include information tes, write your name and o  Debtor 1  Employed  Not employed	e is living with you, ind about your spouse. If ase number (if known)	clude information about y more space is needed, at a large is needed, at a large is needed. Answer every question.  Debtor 2 or non-filing sport  Employed  Not employed  mber Street	use

spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. 3. Estimate and list monthly overtime pay. \$ 0.00 4. Calculate gross income. Add line 2 + line 3.

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Case number (# known)

Debtor 1

Anthony Vernon Bogart

First Name Middle Name Last Name						
		For Debtor 1	<b>.</b>	For Debtor 2 or non-filing spouse		
Copy line 4 here	4.	\$_0.00		\$ 0.00		
5. List all payroll deductions:						
' *	50	<b>o</b>		¢		
5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans	5a. 5b.	\$ \$	_	\$ \$		
5c. Voluntary contributions for retirement plans	5c.	\$ 0.00	-	\$		
5d. Required repayments of retirement fund loans	5d.	\$_0.00 \$	-	Ψ \$		
5e. Insurance	5e.	Ψ	-	\$		
5f. Domestic support obligations	5f.	Ψ	-	\$		
		\$	•	\$		
5g. Union dues	5g.	Ψ	-	•		
5h. Other deductions. Specify:	5h.	+ \$	- '	+ \$		
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ <u>0.00</u>	_	<u>\$ 0.00</u>		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>0.00</u>	-	\$_0.00		
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						ļ
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <u>0.00</u>	_	\$ 0.00		
8b. Interest and dividends	8b.	\$_0.00	_	\$ <u>0.00</u>		
8c. Family support payments that you, a non-filing spouse, or a depende regularly receive	nt					
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_0.00	-	\$ <u>0.00</u>		
8d. Unemployment compensation	8d.	\$ <u>1,928.33</u>	-	\$ <u>0.00</u>		
8e. Social Security	8e.	\$ 0.00	<b>→</b>	\$ <u>0.00</u>		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	ice 8f.	\$_0.00	-	\$ 0.00		
8g. Pension or retirement income	8g.	\$	-	\$_0.00		
8h. Other monthly income. Specify: See Attachment 1	8h.	+ \$ 300.00	<u>.</u> .	+ \$ 0.00		
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ 2,228.33	]	\$_0.00		
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ <u>2,228.33</u>	+	\$ <u>0.00</u>	<b>=</b> \$ 2,22	8.33
11. State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, y friends or relatives.	our d	lependents, your ro				
Do not include any amounts already included in lines 2-10 or amounts that are Specify:	not a	vailable to pay expe	enses	listed in <i>Schedule J</i> . 11.	+ \$ <u>0.00</u>	!
12. Add the amount in the last column of line 10 to the amount in line 11. The	resul	t is the combined n	onth	ly income.		20.22
Write that amount on the Summary of Your Assets and Liabilities and Certain S	Statist	ical Information, if i	app	lies 12.	Comb	ined income
13. Do you expect an increase or decrease within the year after you file this to No.	form?					
☐ Yes. Explain:						

### Addendum

Attachment 1

Debtor assists in friend's business--as needed--appraisal business

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Fill in this information to identify yo	ur case:				
Debtor 1 Anthony Vernon Bogart		Check if this i	e.		
First Name  Debtor 2 Minara Marie Bogart	Middle Name Last Name			_	
(Spouse, if filing) First Name	Middle Name Last Name	—— ☐ An amend	-		etition chapter 13
United States Bankruptcy Court for the: No.	orthern District of Illinois			e following d	
Case number (If known)		MM / DD /	YYYY	•	
Official Form 106J					
Schedule J: You	r Expenses				12/15
Be as complete and accurate as poss information. If more space is needed, (if known). Answer every question.	ible. If two married people are filinated another sheet to this form.	g together, both are equally resp On the top of any additional pag	oonsible jes, writ	for supplying e your name a	g correct and case number
Part 1: Describe Your Hous	ehold				
1. Is this a joint case?					
No. Go to line 2.					
Yes. Does Debtor 2 live in a se	parate household?				
No ☐ Yes. Debtor 2 must file	Official Forms 106J-2, Expenses for	Separate Household of Debtor 2.			
2. Do you have dependents?	☐ No				Dana danandari liva
Do not list Debtor 1 and	Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2		ependent's ge	Does dependent live with you?
Debtor 2.  Do not state the dependents'	each dependent	SON	7		☐ No ☑ Yes
names.		SON	1		☑ No
		SON		<del></del>	Yes
					□ No
					☐ Yes
			_		U No □ Yes
					□ No
: : :			_		Yes
Do your expenses include     expenses of people other than     yourself and your dependents?	☑ No ☐ Yes				
Part 2: Estimate Your Ongoin		us valus Abis farm as a sumplam	ont in a	Chantar 12 a	ago to rapart
Estimate your expenses as of your less expenses as of a date after the bank					
applicable date.	a property in the second secon			•	
Include expenses paid for with non- such assistance and have included				Your exper	ıses
The rental or home ownership ex any rent for the ground or lot.			4.	\$ <u>722.00</u>	
If not included in line 4:					
4a. Real estate taxes			<del>4</del> a.	\$ 0.00	
4b. Property, homeowner's, or re	nter's insurance		4b.	\$ 0.00	
4c. Home maintenance, repair, a			4c.	\$ 100.00	
4d. Homeowner's association or			4d.	\$ 0.00	
			-		

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Debtor 1 Anthony Vernon Bogart Case number (if known) Case number (if known)

		Your expenses
r. Additional markage neumants for your recidence, cuch as home equity loans	5,	\$ 0.00
5. Additional mortgage payments for your residence, such as home equity loans	J.	
6. Utilities:		* 400 CO
6a. Electricity, heat, natural gas	6a.	\$ 100.00
6b. Water, sewer, garbage collection	6b.	\$ 50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 100.00
6d. Other Specify:	6d.	\$_0.00
7. Food and housekeeping supplies	7.	\$ 400.00
8. Childcare and children's education costs	8,	\$_0.00
9. Clothing, laundry, and dry cleaning	9.	\$ 0.00
0. Personal care products and services	10.	\$ <u>150.00</u>
1. Medical and dental expenses	11.	\$ 0.00
2. Transportation. Include gas, maintenance, bus or train fare.		\$ 200.00
Do not include car payments.	12.	7
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ 0.00
4. Charitable contributions and religious donations	14.	\$ <u>0.00</u>
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>		
15a. Life insurance	15a.	\$ <u>0.00</u>
15b. Health insurance	15b.	\$ 0.00
15c. Vehicle insurance	15c.	\$ 86.00
15d. Other insurance. Specify:	15d.	\$ 0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$ <u>0.00</u>
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	<b>\$</b> 0.00
17b. Car payments for Vehicle 2	17b.	\$ 0.00
17c. Other. Specify:	17c.	\$
17d. Other. Specify:	17d.	\$
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</li> </ol>	18.	\$ <u>0.00</u>
9. Other payments you make to support others who do not live with you.		
Specify:	19.	\$_0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	me.	
20a. Mortgages on other property	20a.	\$ 0.00
20b. Real estate taxes	20b.	\$_0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$ 0.00
20e. Homeowner's association or condominium dues	20e.	\$ 0.00

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lebtor 1		Anthony Vernon Bogart Case number st Name Middle Name Last Name	(if known)	
				and the second second
1. Oth	i <b>er</b> . Sp	ecify:	21.	+\$ 0.00
22a	. Add I	your monthly expenses. nes 4 through 21.		\$ 1,908.00 \$
22b 22c	. Copy . Add li	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 ne 22a and 22b. The result is your monthly expenses.	22.	\$ 1,908.00
:3. Calc		our monthly net income.		<b>\$</b> 2,228.33
23a.	Copy	line 12 (your combined monthly income) from Schedule I.	23a.	Ψ <u>1,1110100</u>
23b.	Copy	your monthly expenses from line 22 above.	23b.	<b>-</b> \$ <u>1,908.00</u>
<b>23c.</b>		ract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$ <u>320.33</u>
For	examp	pect an increase or decrease in your expenses within the year after you file this form e, do you expect to finish paying for your car loan within the year or do you expect your ayment to increase or decrease because of a modification to the terms of your mortgage?		
	۷o.			
	es.	Explain here:		

Debtor 1	Anthony	Vernon	Bogart	
	First Name	Middle Name	Last Name	
Debtor 2	Minara	Marie	Bogart	
(Spouse, if filir	IG) First Name	Middle Name	Last Name	
United State	s Bankruptcy Court for	the: Northern Distric	t of Illinois	

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>87,117.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>3,398.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ <u>90,515.00</u>
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$ <u>107,857.47</u>
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ <u>0.00</u>
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 32,101.51
Your total liabilities	\$ <u>139,958.98</u>
art 3: Summarize Your Income and Expenses	***************************************
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <b>2,228.33</b>
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$ 1,908.00

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Debto		ase number (if known)
	First Name Middle Name Last Name	
Part	4: Answer These Questions for Administrative and Statistical Records	\$
c A	re you filing for bankruptcy under Chapters 7, 11, or 13?	
	,	
	No. You have nothing to report on this part of the form. Check this box and submit this t	form to the court with your other schedules.
U	Yes	
7 <b>W</b>	hat kind of debt do you have?	
	•	A state of a state of the face of the face of the state o
L	Your debts are primarily consumer debts. Consumer debts are those "incurred by all family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purpose.	n Individual primanily for a personal, oses, 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this pa	rt of the form. Check this box and submit
	this form to the court with your other schedules.	
y digingen o miningeni d		$120 \times 400 \times 1000 \times 10$
8. F	rom the Statement of Your Current Monthly Income: Copy your total current monthly in	ncome from Official
F	orm 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ <u> </u>
communicação de 140		
9. <b>C</b>	opy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
		Total claim
		\ \
	From Part 4 on Schedule E/F, copy the following:	
9	a. Domestic support obligations (Copy line 6a.)	\$
9	b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$
	c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	
9	c. Claims for death or personal injury write you were intoxicated. (Copy line oc.)	\$
	d Chidant lagra (Cary line Cf.)	
٤	d. Student loans. (Copy line 6f.)	\$
ę	e. Obligations arising out of a separation agreement or divorce that you did not report as	
	priority claims. (Copy line 6g.)	\$
,	f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ s
٤	i. Depth to perioral or profit-straining prairie, and other difficial depth. (Oop) into Oth)	
	Table Add lines On through Of	•
٤	g. Total. Add lines 9a through 9f.	Ψ

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Fill in this in	formation to identify yo	our case:	
Debtor 1	Anthony Vernon Bogart	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Minara Marie Bogart First Name	Middle Name	Last Name
United States	Bankruptcy Court for the: _	Norther	n District Of Illinois
Case number (if known)			

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
⊠ No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have read that they are true and correct.	the summary and schedules filed with this declaration and
· Augher	× d
s/Anthony Vernon Bogart	s/Minara marie Bogan
Signature of Debtor 1  Date 01/12/2017  MM / DD / YYYY	Signature of Debtor 2  Date 01/12/2017  MM7 DD / YYYY

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Fill in this information to identify your case:							
Debtor 1	Anthony	Vernon	Bogart				
	First Name	Middle Name	Last Name				
Debtor 2	Minara	Marie	Bogart				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	Northern District of Illinois					
Case number (If known)							

☐ Check if this is an amended filing

### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

. What	t is your current marital :	status?								
	Aarried Not married									
. Durii	ng the last 3 years, have	you live	l anywhere o	other tha	n where yo	u live nov	<i>i</i> ?			
□ 1	√lo √es. List all of the places y	ou lived i	n the last 3 y	ears. Do	not include	where you	live now.			
	Debtor 1:			Dates lived t	Debtor 1 there	Debtor 2	<b>::</b>			Dates Debtor 2 lived there
						⊠ Same	as Debtor 1			☐ Same as Debtor 1
	1341 1/2 N. Liberty St., I Number Street	Unit 5		From To	07/01/11 07/01/14	Numb	er Street			From <u>07/01/11</u> To <u>07/01/14</u>
	Morris City	IL State	60450 ZIP Code			City		State	ZIP Code	
				,		☐ Same	as Debtor 1			Same as Debtor 1
	Number Street			From To		Numi	er Street			From
	City	State	ZIP Code			City		State	ZIP Code	
and ⊠ N	nin the last 8 years, did y territories include Arizona No Yes. Make sure you fill out	, Californ	ia, Idaho, Lou	iisiana, N	evada, New	Mexico, I	community pro Puerto Rico, Tex	perty state as, Washing	or territory? (6 ton, and Wisco	Community property state nsin.)

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btor 1	Anthony Vernon Bogart		Case nu	mber (if known)	
	First Name Middle Name Last N	lame			
art 2:	Explain the Sources of Your Inc	ome			
Fill in t	ou have any income from employment the total amount of income you received are filing a joint case and you have inco	from all jobs and all busing	nesses, including part-tin	ne activities.	dar years?
🗵 Ye	es. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until he date you filed for bankruptcy:	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$ 0.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$ 0.00
	For last calendar year:  January 1 to December 31, 2015	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$ <u>32,815.00</u>		\$ <u>12,792.00</u>
*****	YYYY	₩ages, commissions,	ook oo oo 'a daa ah a	Wages, commissions, bonuses, tips	\$ 26,090.00
Did you Include	For the calendar year before that:  January 1 to December 31, 2014 YYYY  Ou receive any other income during the income regardless of whether that income public benefit payments; pensions; angs. If you are filing a joint case and you	ome is taxable. Examples rental income; interest; div	of other income are alim vidends; money collected	l from lawsuits; royalties; ar	Security, unemploymer
Did you Include and of winning List ea	January 1 to December 31, 2014  YYYYY  ou receive any other income during the income regardless of whether that income public benefit payments; pensions; angs. If you are filing a joint case and you ach source and the gross income from e	Operating a business  is year or the two previous  ome is taxable. Examples  rental income; interest; divided income that you rec	ous calendar years? of other income are alim vidends; money collected eived together, list it only	nony; child support; Social S I from lawsuits; royalties; ar y once under Debtor 1.	Security, unemploymen
Did you Include and of winning List ea	January 1 to December 31, 2014  YYYYY  ou receive any other income during the income regardless of whether that income regardless of whether that income public benefit payments; pensions; and go, If you are filing a joint case and you ach source and the gross income from end	Operating a business  is year or the two previous  ome is taxable. Examples  rental income; interest; divided income that you rec	ous calendar years? of other income are alim vidends; money collected eived together, list it only	nony; child support; Social S I from lawsuits; royalties; ar y once under Debtor 1.	Security, unemploymen
Did you Include and of winning List ea	January 1 to December 31, 2014  YYYYY  ou receive any other income during the income regardless of whether that income regardless of whether that income public benefit payments; pensions; and go, If you are filing a joint case and you ach source and the gross income from end	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divide have income that you receated source separately. Do	ous calendar years? of other income are alim vidends; money collected eived together, list it only	nony; child support; Social S I from lawsuits; royalties; ar y once under Debtor 1. I you listed in line 4.	Gross income from each source
Did you Include and of winnin List ea	January 1 to December 31, 2014 YYYYY  ou receive any other income during the income regardless of whether that incenter public benefit payments; pensions; angs. If you are filing a joint case and you ach source and the gross income from e oes. Fill in the details.	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and	nony; child support; Social S I from lawsuits; royalties; ar y once under Debtor 1. It you listed in line 4.  Debtor 2  Sources of income	Gross Income from each source (before deductions and
Did you Include and of winnin List ea	January 1 to December 31, 2014 YYYY  ou receive any other income during the income regardless of whether that incomer public benefit payments; pensions; angs. If you are filing a joint case and you are source and the gross income from each source and the gross income from each. Fill in the details.	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and	nony; child support; Social S I from lawsuits; royalties; ar y once under Debtor 1. It you listed in line 4.  Debtor 2  Sources of income	Gross Income from each source (before deductions and
Did you Include and of winnin List ea	January 1 to December 31, 2014 YYYYY  ou receive any other income during the income regardless of whether that incenter public benefit payments; pensions; angs. If you are filing a joint case and you ach source and the gross income from e oes. Fill in the details.	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and	nony; child support; Social S I from lawsuits; royalties; ar y once under Debtor 1. It you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions an
Did you Include and of winning List ear No. Yes	January 1 to December 31, 2014 YYYYY  ou receive any other income during the income regardless of whether that incenter public benefit payments; pensions; angs. If you are filing a joint case and you ach source and the gross income from e oes. Fill in the details.	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and	nony; child support; Social S I from lawsuits; royalties; ar y once under Debtor 1. It you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions an
Did you Include and of winning List ear No.	January 1 to December 31, 2014  YYYYY  ou receive any other income during the income regardless of whether that incenter public benefit payments; pensions; angs. If you are filing a joint case and you ach source and the gross income from each source and the gross income from each source. Fill in the details.	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and exclusions)  \$	nony; child support; Social Statement from lawsuits; royalties; and concern under Debtor 1.  It you listed in line 4.  Debtor 2  Sources of income Describe below.  PENSION/ANNUITY	Gross income from each source (before deductions an exclusions)
Did you Include and of winning List ear No.	January 1 to December 31, 2014  YYYYY  Ou receive any other income during the income regardless of whether that incenter public benefit payments; pensions; angs. If you are filing a joint case and you ach source and the gross income from each source and the gross income from each source.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2015	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and exclusions)  \$	nony; child support; Social Sil from lawsuits; royalties; and once under Debtor 1. It you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Did you include and of winnin List ea I No I Ye	January 1 to December 31, 2014 YYYYY  ou receive any other income during the income regardless of whether that income public benefit payments; pensions; angs. If you are filing a joint case and you are and the gross income from each source and the gross income from each source and the gross income from each source.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2015 YYYY)	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and exclusions)  \$	nony; child support; Social Statement from lawsuits; royalties; and concern under Debtor 1.  It you listed in line 4.  Debtor 2  Sources of income Describe below.  PENSION/ANNUITY	Gross income from each source (before deductions an exclusions)
Did you Include and of winning List early Ye	January 1 to December 31, 2014  YYYYY  Ou receive any other income during the income regardless of whether that incenter public benefit payments; pensions; angs. If you are filing a joint case and you ach source and the gross income from each source and the gross income from each source.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2015	Operating a business  is year or the two previous is taxable. Examples rental income; interest; divided have income that you reclarch source separately. Do  Debtor 1  Sources of income Describe below.	ous calendar years? of other income are alim vidends; money collected elived together, list it only o not include income that  Gross income from each source (before deductions and exclusions)  \$	nony; child support; Social Statement from lawsuits; royalties; and concern under Debtor 1.  It you listed in line 4.  Debtor 2  Sources of income Describe below.  PENSION/ANNUITY	Gross income from each source (before deductions and exclusions)

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Anthony Vernon Bogart Debtor 1 Case number (if known)\_ Last Name First Name Middle Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment for... Dates of Total amount paid payment ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other State ZIP Code City ☐ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street Loan repayment ☐ Suppliers or vendors Other\_\_\_\_\_ State ZIP Code \$ ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment ☐ Suppliers or vendors Other\_\_\_\_ City State ZiP Code

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Case number (# known)\_\_\_

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<i>nsio</i> corp age	fers include your orations of which	relatives; an n you are an for a busine	ny genei officer, ess you c	ral partners; director, per	relatives of any grown in control, or	general partners; partners; partners; partners	artnerships of which nore of their voting :	no was an insider? I you are a general partner; securities; and any managing domestic support obligations,
X i	No							
<b>]</b>	Yes. List all paym	nents to an i	insider.					
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
					_	\$	_ \$	
	Insider's Name							
	Number Street							
	City	m., 1997 h.M. 9 470 h. A	State	ZIP Code	S 175 v. n. 270 v. de n. 270 de de de n.	1984 - 1984 - 1985 - 1986 A. Danie andreid medicar Schaled Unidense adult S. D. S. S.	. M. & (2011), 11-72,	CAMILLE AT THE PROPERTY OF THE
	Insider's Name					\$	\$	
	Number Street							
			- · · · -					
	Cit.		Ctata	7ID Codo				
	City		State	ZIP Code	-			
Vith	-	you filed f			you make any p	ayments or transf	er any property on	account of a debt that benefited
an i	iin 1 year before nsider?		or bank	ruptcy, did		ayments or transf	fer any property on	account of a debt that benefited
n i	in 1 year before		or bank	ruptcy, did		ayments or transf	ier any property on	account of a debt that benefited
in i ncli X	nin 1 year before nsider? ude payments on	ı debts guar	or bank anteed c	ruptcy, did		ayments or transf	fer any property on	account of a debt that benefited
n i ncli	iin 1 year before nsider? ude payments on	ı debts guar	or bank anteed c	ruptcy, did		ayments or transf	er any property on	account of a debt that benefited
n i ncli	nin 1 year before nsider? ude payments on	ı debts guar	or bank anteed c	ruptcy, did		ayments o <del>r</del> transf Total amount paid	fer any property on Amount you still owe	account of a debt that benefited  Reason for this payment Include creditor's name
n i Icli	iin 1 year before nsider? ude payments on No Yes. List all payn	ı debts guar	or bank anteed c	ruptcy, did	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i Icli	nin 1 year before nsider? ude payments on	ı debts guar	or bank anteed c	ruptcy, did	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i Icli	iin 1 year before nsider? ude payments on No Yes. List all payn	ı debts guar	or bank anteed c	ruptcy, did	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i ncli	in 1 year before nsider? ude payments on No Yes. List all payn insider's Name	ı debts guar	or bank anteed c	ruptcy, did	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i ncli	nin 1 year before nsider? ude payments on No Yes. List all paym insider's Name	ı debts guar	or bank anteed o	ruptcy, did or cosigned an insider.	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i ncli	in 1 year before nsider? ude payments on No Yes. List all payn insider's Name	ı debts guar	or bank anteed c	ruptcy, did	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i ncli	nin 1 year before nsider? ude payments on No Yes. List all paym insider's Name	ı debts guar	or bank anteed o	ruptcy, did or cosigned an insider.	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i ncli	nin 1 year before nsider? ude payments on No Yes. List all paym insider's Name	ı debts guar	or bank anteed o	ruptcy, did or cosigned an insider.	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
n i ncli	nin 1 year before nsider? ude payments on No Yes. List all payn Insider's Name Number Street	ı debts guar	or bank anteed o	ruptcy, did or cosigned an insider.	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
in i ncli X	in 1 year before nsider? ude payments on No Yes. List all payn Insider's Name  Number Street  City  Insider's Name	ı debts guar	or bank anteed o	ruptcy, did or cosigned an insider.	by an insider. Dates of	Total amount	Amount you still	Reason for this payment
an i Incli X	in 1 year before nsider? ude payments on No Yes. List all payn Insider's Name  Number Street  City  Insider's Name	ı debts guar	or bank anteed o	ruptcy, did or cosigned an insider.	by an insider. Dates of	Total amount	Amount you still	Reason for this payment

Debtor 1

Anthony Vernon Bogart

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ebtor 1	Anthony Vernon Bogart		Case number (if known)		
	First Name Middle Name Last	Name			
	_				
Part 4	Identify Legal Actions, Reposs	essions, and Foreclosures			
	in 1 year before you filed for bankrupt				
	all such matters, including personal injury	cases, small claims actions, divo	rces, collection suits, paternity ac	ctions, support	or custody modifications,
and o	contract disputes.				
ĽΥ	es. Fill in the details.				
		Nature of the case	Court or agency		Status of the case
	ODER EVE ADDODINED V	MEDICAL COLLECTIONS	GRUNDY COUNTY CIRCU	JIT COURT	D - "
	Case title ORTIZ EYE ASSOCIATES V.		Court Name		— Pending
	See Attachment 1		111 E. WASHINGTON ST.		On appeal
			Number Street		─ ⊠ Concluded
	Case number 16 SC 624		MORRIS IL	60450	
			City State	ZIP Code	_
		MEDICAL COLLECTIONS	er generaliste server, commente anno en en en en en anno en	anamaka san a las meneralang meneral	green to the control of the second
	Case title CREDITORS DISCOUNT &		GRUNDY COUNTY CIRCL Court Name	JIT COURT	— ☐ Pending
					On appeal
	AUDIT V. ANTHONY BOGART		111 E. WASHINGTON ST.  Number Street		Concluded
	Case number 16 SC 661		MODDIO	00450	
	Case number 10 00 001		MORRIS IL City State	ZIP Code	
	in 1 year before you filed for bankrupt		and Midden		See Attachment 2
□ Y	es. Fill in the information below.	Describe the property		Date	Value of the property
		Sechelles Let Source to Let No. 49 (1979) 10 (1978) 29 (1974)			
					\$
	Creditor's Name				
	Number Street	Explain what happene			
		Property was rep			
		Property was for			
		— Droporty was at	rnistied. ached, seized, or levied.		
	City State ZIP C		acticu, scizeu, of levicu.	encoordinates et a. de 27 tomos	and a second
		Describe the property		Date	Value of the property
					\$
	Creditor's Name				
			NATIONAL DIVERSITY OF THE PROPERTY AND T		
	Number Street	Explain what happene	d		
		Property was re			
		Property was for Property was ga			
	City State ZIP C	`nde	ached, seized, or levied.		
		tion was to know he was book as dealer by the 1975 Anni property of the same as a second to the	er men vid en en mederne mederiklikken er kerket (NASA), vid VIV 2786, vijegegegegene en en er en en	erene e e e e e e e e e e e e e e e e e	Society ASSES Springers of the company of the contract of the

Debtor 1

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Case number (if known)\_\_\_\_\_

Anthony Vernon Bogart

r 1	Anthony Vernon Bogart	Case number	(// Known)	
	First Name Middle Name Last No	ame		
. With	in 90 days before you filed for bankrupt	tcy, did any creditor, including a bank or financial in	nstitution, set oπ any amo	unts from your
	ounts or refuse to make a payment beca	tuse you owed a dept?		
X N				
U 1	Yes. Fill in the details.			
		Describe the action the creditor took	Date action	Amount
_			was taken	
C	Creditor's Name			
_				š
١	Number Street			
7	City State ZIP Code	Last 4 digits of account number: XXXX		
•			<u> </u>	
Mitt	nin 1 year hefore you filed for hankrunte	y, was any of your property in the possession of a	n assignee for the benefit o	of
cred	litors, a court-appointed receiver, a cus	todian, or another official?	•	
× 1				
	. <u> </u>			
rt 5:	List Certain Gifts and Contribut	tions		
* - * -				
NAG4L	in 1 years hefore you filed for hankrunt	cy, did you give any gifts with a total value of more	than \$600 per person?	
		cy, and you give any gines with a total raise of mere	with the part part part part part part part part	
	No Yes. Fill in the details for each gift.			
<b>u</b>	res. Fill in the details for each grit.			
	Gifts with a total value of more than \$600	Describe the aifts	Dates you gave	Value
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Describe the gifts		Value
		Describe the gifts		Value \$
ī		Describe the gifts		Value
Ī	per person	Describe the gifts		Value \$
	per person	Describe the gifts		Value \$ \$
	per person  Person to Whom You Gave the Gift	Describe the gifts		Value \$ \$
	per person  Person to Whom You Gave the Gift	Describe the gifts		Value \$ \$
	per person  Person to Whom You Gave the Gift	Describe the gifts		Value \$ \$
	per person  Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
-	per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	Describe the gifts		Value \$\$
-	per person  Person to Whom You Gave the Gift  Number Street	Describe the gifts		Value \$\$
-	per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you			Value  \$  \$  Value
- - - -	per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code		the gifts	\$\$
- - - -	per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600		the gifts	\$\$
- - - -	per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600		the gifts	\$\$
- - - - -	per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600		the gifts	\$ \$
- - - - -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		the gifts	\$ \$
- - - - - -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		the gifts	\$\$
- - - - - -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		the gifts	\$ \$
- - - - - -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		the gifts	\$ \$
- - - - - - -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		the gifts	\$\$
- - - - - -	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street		the gifts	\$ \$
	Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		the gifts	\$ \$

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1	Anthony Vernor			Case number (if known)		
	First Name Mix	idle Name	Last N	ame		
		ou filed t	for bankrupt	cy, did you give any gifts or contributions with a total value	of more than \$600	to any charity?
N E		for and	h aift ar cantr	ibution		
<b>」</b> Y	es. Fill in the details	ior eac	n gni or conu	idulion.		
	Gifts or contributions that total more than \$		ties	Describe what you contributed	Date you contributed	Value
	mat total more than t				)	
					Table 1	\$
CI	harity's Name					Υ
_						\$
N	lumber Street				The state of the s	
-						
<u>_</u>	ity State	ZIP Code			}	
Ū.	.,			3	·	
t 6:	List Certain	Losses				
	Describe the propert the loss occurred	y you los	t and how	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	makada (1 17 194 14 14 14 14 14 14 14 14 14 14 14 14 14		A STATE OF THE STA			\$
				Particular designation of the second		
t 7:	<u> </u>					
Vith	in 1 year before yo	u filed f	or bankrupte	cy, did you or anyone else acting on your behalf pay or trans eparing a bankruptcy petition?	sfer any property to	anyone you
Inclu	de any attorneys, ba	ankrupto	y petition pre	parers, or credit counseling agencies for services required in yo	our bankruptcy.	
<b>a</b>	No					
X Y	es. Fill in the detail:	S.				
				Description and value of any property transferred	Date payment or transfer was made	Amount of paymen
	MALMQUIST AND Person Who Was Paid	GEIGE	R, LLC		Tansier was indue	
	415 LIBERTY ST.				12/29/16	\$ 310.00
	Number Street				12123110	φ <u>στοίοσ</u>
					restination	\$
	MORRIS	IL.	60450		Colpins villa unione	
	City	State	ZIP Code		TAX NO. WITH A MARKET AND A MAR	
	Email or website address					
	Person Who Made the Pa	avment if t	Not You	Table 1	***	
	, craori vviio ividuo (ile Fi	ajinorii, il l	101 100			namentalisti de proposita esperante en manuel de maio de desistencia.

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	Description and value of any property tra	ınsferred	Date payment or transfer was made	Amount of payment
001 DEBTOR CC, INC. Person Who Was Paid			1 and the second	
TOTOMITY THE THE			01/09/17	\$ <u>15.00</u>
Number Street				e
				Ψ
			No.	
City State ZIP Code				
WWW.DEBTORCC.ORG	-			
Email or website address				
Person Who Made the Payment, if Not You			-	
No Yes. Fill in the details.				
Yes. Fill in the details.	Description and value of any property to	ansferred	Date payment or	Amount of payr
	Dubbliphon and value of any property a		transfer was made	, ,
Person Who Was Paid				\$
Number Street	11-11-11-11-11-11-11-11-11-11-11-11-11-			
	Name of the state			\$
City State ZIP Code	Table Banks			
nsferred in the ordinary course of your l ude both outright transfers and transfers n not include gifts and transfers that you hav	nade as security (such as the granting of	a security interest or m	ortgage on your pro	perty).
No Yes. Fill in the details.				
No	Description and value of property transferred	Describe any property or debts paid in excha		Date transfi was made
No	Description and value of property			
No Yes. Fill in the details.	Description and value of property			
No Yes, Fill in the details.  Person Who Received Transfer	Description and value of property			
No Yes, Fill in the details.  Person Who Received Transfer  Number Street	Description and value of property			
No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	Description and value of property			
No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	Description and value of property			
No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	Description and value of property			

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or 1	Anthony Vernon Bogart		Case number (if known	<u> </u>	
	First Name Middle Name Last I	tame			
With	in 10 years before you filed for bankruj	itcy, did you transfer any property	/ to a self-settled trust o	r similar device of whi	ich you
are a	a beneficiary? (These are often called as	set-protection devices.)			
X	No.				
	es. Fill in the details.				
_ '	roo. This is a dotallo.				
		Description and value of the proper	ty transferred		Date transfer was made
					was made
					u ana ana ana ana ana ana ana ana ana an
٨	Name of trust				
_					a constant
		January			
4.0		Lucker Cafe Banasit E	lavae and Starage II	nite	
rt 8:					
With	iin 1 year before you filed for bankrupte	y, were any financial accounts or	instruments held in yo	ur name, or for your b	enefit,
clos	ed, sold, moved, or transferred?				
Inclu	ude checking, savings, money market,	or other financial accounts; certif	icates of deposit; share	s in banks, credit unic	ons,
brok	cerage houses, pension funds, coopera	itives, associations, and other fin	ancial institutions.		
X					
<b>1</b>	Yes. Fill in the details.				
		Last 4 digits of account number	Type of account or	Date account was	Last balance befor
			Instrument	closed, sold, moved, or transferred	closing or transfer
				o, danoron o	
	Name of Financial Institution	www	Checking		ŧ
		xxxx	_		<b>J</b>
	Number Street		Savings		
			Money market		
			Brokerage		
			- Diokerage		
	City State ZIP Code		Other		
	City State ZIP Code				
			Other		\$
		xxxx	Other	·····	\$
		XXXX	Other		\$
		xxxx	Other Checking Savings Money market		\$
	Name of Financial Institution	xxxx	Other		\$
	Name of Financial Institution	xxxx	Other Checking Savings Money market	······································	\$
	Name of Financial Institution  Number Street	XXXX	Other	······································	\$·
	Name of Financial Institution  Number Street  City State ZIP Code		Other  Checking Savings Money market Brokerage Other		\$
	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1		Other  Checking Savings Money market Brokerage Other	x or other depository	\$for
seci	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?		Other  Checking Savings Money market Brokerage Other	x or other depository	\$for
seci X	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?		Other  Checking Savings Money market Brokerage Other	x or other depository	\$for
seci X	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?	year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		
seci X	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?		Other  Checking Savings Money market Brokerage Other		
seci	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?	year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		Do you stil
seci X	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?	year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		Do you stil have it?
seci	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?	year before you filed for bankrup	Other Checking Savings Money market Brokerage Other		Do you stil
seci ×	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1  urities, cash, or other valuables?  No  Yes. Fill in the details.	year before you filed for bankrup Who else had access to it?	Other Checking Savings Money market Brokerage Other		Do you stil have it?
seci	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1  urities, cash, or other valuables?  No  Yes. Fill in the details.	year before you filed for bankrup Who else had access to it?	Other Checking Savings Money market Brokerage Other		Do you stil have it?
seci	Name of Financial Institution  Number Street  City State ZIP Code  you now have, or did you have within 1 urities, cash, or other valuables?  No Yes. Fill in the details.	year before you filed for bankrup Who else had access to it?	Other Checking Savings Money market Brokerage Other		Do you sti have it?

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or 1	Anthony Vernon Bogart		Case number (if known)	
		st Name		
		or place other than your home within	1 year before you filed for bankruptcy?	
X N				
IJ Y₁	es. Fill in the details.			B
		Who else has or had access to it?	Describe the contents	Do you still have it?
			}	□ No
	Name of Storage Facility	Name		☐ Yes
	Number Street	Number Street		
		Oh Otala 700 Orale		
		City State ZIP Code		
,,,,,, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	City State ZIP Code		and the second s	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ırt 9:	Identify Property You Hold	or Control for Someone Else		
Davis	very held an control only property that	company also owne? Include any proj	perty you borrowed from, are storing for	·_
	ou noid or control any property that it old in trust for someone.	Softleone else owns i include any proj	serty you borrowed from, and otoring for	)
	Yes. Fill in the details.			
_	103.1 III III tilo dottallo.	Where is the property?	Describe the property	Value
		energies and property:		
	Owner's Name			\$
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# Case 17-01124 Doc 1 Filed 01/13/17 Entered 01/13/17 22:34:08 Desc Main Document Page 56 of 64

r 1 Anthony Vernori E First Name Middle	Bogart			Case number (if known)	
	e Name Last N	ame			
Have you notified any gov	vernmental unit of a	any release of hazardous n	naterial?		
☑ No					
Yes. Fill in the details.	i.				
		Governmental unit	Envi	onmental law, if you know it	Date of notice
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lave you been a party in	any judicial or adm	ninistrative proceeding und	der any enviro	onmental law? Include settleme	ents and orders.
☑ No					
Yes. Fill in the details	j.				
		Court or agency		Nature of the case	Status of the
			· · · · · · · · · · · · · · · · · · ·		case
Case title					☐ Pending
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					<u> </u>
		Number Street	-		Conclude
Case number		City State	ZIP Code		.,
Within 4 years before you	u filed for bankrupt	cy, did you own a busines	s or nave any	of the following connections i	o any business?
A sole proprietor	or self-employed in		ther activity, e	ither full-time or part-time	o any business?
A sole proprietor A member of a lin A partner in a par	or self-employed in mited liability comp rtnership	n a trade, profession, or ot	ther activity, e	ither full-time or part-time	o any business?
☐ A sole proprietor☐ A member of a lin☐ A partner in a par☐ An officer, director	or self-employed in mited liability comp rtnership or, or managing exc	n a trade, profession, or ot any (LLC) or limited liabilit	ther activity, e ty partnership	ither full-time or part-time	o any business?
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	Anthony Vernon Bogart First Name Middle Name Las	Case n	number (il known)
-		Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
	Business Name		EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
			From To
	City State ZIP Code		
nst	titutions, creditors, or other parties.	otcy, did you give a financial statement to anyo	ne about your business? Include all financial
	No Yes. Fill in the details below.		
		Date issued	
	Name	MM / DD / YYYY	
	Number Street		
		-	
	City State ZIP Code		
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l h an in	2: Sign Below  nave read the answers on this Stateme nswers are true and correct. I understa connection with a bankruptcy case cas U.S.C. §§ 152, 1341, 1519, and 3571.	nd that making a false statement, concealing p	property, or obtaining money or property by fraud
l h an in 18	2: Sign Below  have read the answers on this Statemenswers are true and correct. I understate connection with a bankruptcy case cast U.S.C. §§ 152, 1341, 1519, and 3571.  S/Anthony Vernon Bogart	nd that making a false statement, concealing per result in fines up to \$250,000, or imprisonme	property, or obtaining money or property by fraud
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I h an in 18	ave read the answers on this Statemenswers are true and correct. I understate connection with a bankruptcy case cast U.S.C. §§ 152, 1341, 1519, and 3571.  S/Anthony Vernon Bogart Signature of Debtor 1  Date 12 January 2017 Individual you attach additional pages to Your	nd that making a false statement, concealing point result in fines up to \$250,000, or imprisonment of the statement of the st	property, or obtaining money or property by fraud ent for up to 20 years, or both.
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anin 18	2: Sign Below  have read the answers on this Statement is swers are true and correct. I understate connection with a bankruptcy case cast U.S.C. §§ 152, 1341, 1519, and 3571.  S/Anthony Vernon Bogart Signature of Debtor 1  Date 12 January 2017  id you attach additional pages to Your No Yes	nd that making a false statement, concealing point result in fines up to \$250,000, or imprisonment of Signature of Debtor 2  Date 12 January 2017  Statement of Financial Affairs for Individuals F	Filing for Bankruptcy (Official Form 107)?

# Attachment Debtor: Anthony Vernon Bogart Case No:

Attachment 1

MINARA SPANGLER, N/K/A MINARA BOGART

Attachment 2 Additional Lawsuits, Court Actions, or Administrative Proceedings

Case Title: WELLS FARGO BANK, N.A. V. ANTHONY BOGART AND MINARA M.

SPANGLER, ET. AL. Case Number: 16 CH 141

Nature of Case: MORTGAGE FORECLOSURE

Court or Agency's Name: GRUNDY COUNTY CIRCUIT COURT

Court or Agency's Address: 111 E. WASHINGTON ST., MORRIS, IL 60450

Status of Case: Pending

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B2030 (Form 2030) (12/15)

### United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS

In	re	Anthony Verno	n Bogart and Minara Marie E		
				Case No.	
De	btor			Chapter 13	
		DISCL	OSURE OF COMPENSATION	N OF ATTORNEY FOR DEBTOR	
1.	nan ban	ned debtor(s) and the kruptcy, or agreed	nat compensation paid to me with	6(b), I certify that I am the attorney for the above nin one year before the filing of the petition in dered or to be rendered on behalf of the debtor(s) in case is as follows:	
	For	r legal services, I ha	we agreed to accept	\$4,000.00	
	Prie	or to the filing of th	is statement I have received	\$ <u>0.00</u>	
	Bal	lance Due		\$4,000.00	
2.	The	e source of the com	pensation paid to me was:		
		X Debtor	Other (specify)		
3.	The	e source of compen	sation to be paid to me is:		
		X Debtor	Other (specify)		
4.			reed to share the above-disclosed ociates of my law firm.	compensation with any other person unless they are	
		members or assoc	to share the above-disclosed con iates of my law firm. A copy of the compensation, is attached.	npensation with a other person or persons who are no the agreement, together with a list of the names of th	ot e
5.		return for the above se, including:	e-disclosed fee, I have agreed to a	render legal service for all aspects of the bankruptcy	
	a.	Analysis of the defile a petition in b		ndering advice to the debtor in determining whether	tc
	b.	Preparation and f	lling of any petition, schedules, s	tatements of affairs and plan which may be required;	
	c.	Representation of hearings thereof;	the debtor at the meeting of cred	litors and confirmation hearing, and any adjourned	

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B2030 (Form 2030) (12/15)
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d	Representation of the debter-in-adversary process	dines and other-	centested-bankrupte	v-m <del>otters:-</del>

e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 12, 2017

s/James M. Durkee

Date

Signature of Attorney

Malmquist and Geiger, LLC

Name of law firm

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ADVENTIST HINSDALE HOSPITAL C/O MALCOLM S. GERALD AND ASSOCIATES, IN 33 SOUTH MICHIGAN AVE., SUITE 600 CHICAGO, IL 60604-4318

ADVENTIST HINSDALE HOSPITAL 75 REMITTANCE DR., SUITE 3250 CHICAGO, IL 60675-3250

Angela Fillenwarth Boggs and Fillenwarth, Ltd. 211 E. Jefferson St., #A Morris, IL 60450

ASSOCIATES PATHOLOGISTS, LLC. C/O FROST - ARNETT COMPANY P.O. BOX 198988 NASHVILLE, TN 37219-8988

ATG CREDIT 1700 W. CORLAND ST., SUITE 201 CHICAGO, IL 60622

CAPITAL ONE BANK (USA), N.A. P.O. BOX 6492 CAROL STREAM, IL 60197

CODILIS & ASSOCIATES, P.C. 15W030 NORTH FRONTAGE RD., SUITE 100 BURR RIDGE, IL 60527

COMENITY BANK
BANKRUPTCY DEPARTMENT
P.O. BOX 182125
COLUMBUS, OH 43218-2125

CREDITOR'S DISCOUNT & AUDIT CO. 415 E. MAIN ST. P.O. BOX 213 STREATOR, IL 61364-0213

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CREDITOR'S DISCOUNT AND AUDIT CO. 415 E. MAIN ST. STREATOR, IL 61364

EPIC GROUP, S.C. P.O. BOX 88087 CHICAGO, IL 60680-1087

MICHAEL R. NAUGHTON P.O. BOX 10 MANHATTAN, IL 60442

MIRAMED REVENUE GROUP 991 OAK CREEK DR. LOMBARD, IL 60148

MORRIS HOSPITAL BUSINESS OFFICE 150 W. HIGH ST. MORRIS, IL 60450-1497

ONEMAIN
P.O. BOX 790368
ST. LOUIS, MO 63179-0368

ORTIZ EYE ASSOCIATES C/O ANGELA M. FILLENWARTH 211 E. JEFFERSON ST., SUITE A MORRIS, IL 60450

PERSONAL FINANCE COMPANY, LLC 100 COMMERCIAL DR. #4 MORRIS, IL 60450

PRESENCE SAINT JOSEPH MEDICAL CENTER 32814 COLLECTION CENTER DR. CHICAGO, IL 60693-0328

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SPRINGLEAF C/O ONE MAIN 2149 W. JEFFERSON ST. JOLIET, IL 60435

TEK COLLECT
P.O. BOX 1269
COLUMBUS, OH 43216

VASECTOMY SPECIALIST CLINICS OF CHICAGO, 111 N. WABASH AVE., SUITE 1210 CHICAGO, IL 60602

VASECTOMY SPECIALISTS CLINICS OF CHICAGO 1S 183 SUMMIT AVE. OAKBROOK TERRACE, IL 60181

WELLS FARGO HOME MORTGAGE P.O. BOX 10335 DES MOINES, IA 50306

WELLS FARGO HOME MORTGAGE P.O. BOX 14538 DES MOINES, IA 50306 Case 17-01124 Doc 1 Filed 01/13/17 Entered 01/13/17 22:34:08 Desc Main Document Page 64 of 64

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:	Bankruptcy Case Number:
Anthony Vernon Bogart and Marie Bogart	l Minara
VEI	RIFICATION OF CREDITOR MATRIX
	Number of Creditors:
The above named Debtor(s) hereby verifies knowledge.	that the list of creditors is true and correct to the best of my (our)
Dated: <b>January 12, 2017</b>	s/Anthony Vernon Bogart  Debtor
	s/Minara Marie Bogart